Image# 13961142774 PAGE 1 / 227

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office U	se Only	
1.	NAME OF COMMITTE	EE (in full)	TYPE OR	PRINT ▼		mple: If typir r the lines.	ng, type	12FE4	M5		
N	lational E	mergency I	Medicine	Political	Action Co	mmittee		1 1 1	1 1 1 1	1 1 1	1
_											
			1 4405 Fu	a austinua Ginala							
AD	DRESS (num	ber and street)	1125 EX	ecutive Circle							
r		if different									
ľ		reviously ed. (ACC)	Irving					TX	7503	8	
2.	FEC IDEN	TIFICATION N	IUMBER ▼		CITY ▲		5	STATE A		ZIP COI	DE 🛦
	C coo	140061			3. IS THIS REPORT		NEW N) OR	×	AMENDED (A)		
4.	TYPE OF (Choose On	REPORT e)		nthly oort	Feb 20 (M2)		May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarter	a) Quarterly Reports:		e OII.	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	Δr				Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
		uarterly Report ((Q1) (c)	12-Day	П	Primary (12F	·)	Gen	eral (12G)	П	Runoff (12R)
	× Ju	July 15 Quarterly Report (Q2)		PRE-Election		Convention (12C)	Sned	cial (12S)		
		ctober 15 uarterly Report ((Q3)	riopoit ioi i		Convention (123)	Орос	siai (120)		
	Ja Ye	nuary 31 ear-End Report ((YE)	E	Election on	M M /	D D /	Y	Y	in the State o	f
	Ju Re	ily 31 Mid-Year eport (Non-electi ear Only) (MY)	(d)	30-Day POST-Elect		General (300	G)	Rund	off (30R)		Special (30S)
		Termination Report		Report for t	he:	M = M /	D D /	Y Y Y	Y	in the	
	(1	ER)		E	Election on					State o	f
5.	Covering Pe	eriod ()4 0		012	through	M M 06	30	20	12 Y	
l ce	ertify that I ha	ave examined t	this Report a	and to the be	est of my kno	wledge and I	pelief it is true	e, correc	t and comple	ete.	
	-	ame of Treasur	-	Edans CPA, C	-				· 		
				u cup				1	M M / D	D /	Y Y Y
Sig	nature of Tre	easurer Phy	ellis Edans CF	A, CAE		[Electronically	y Filed] D	ate (0311		2013
NO	TE: Submission	on of false, erro	neous, or inc	complete infor	mation may su	bject the pers	son signing th	is Report	to the penalt	ies of 2 l	J.S.C. §437g.
	Office	,							FEC	FOR	M 3X
	_ Use _ Only									Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

National Emergency Medicine Political Action Committee

Report Covering the Period: From: 04 01 2012 To: 06 30 2012

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		798835.64
	(b) Cash on Hand at Beginning of Reporting Period	298906.61	
	(c) Total Receipts (from Line 19)	401744.62	553635.59
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	700651.23	1352471.23
7.	Total Disbursements (from Line 31)	331308.85	617560.48
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	369342.38	734910.75
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Emergency Medicine Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
ntributions (other than loans) From:	1	
	197170.07	254166.83
(i) Itemized (use Schedule A)	187170.07	254100.00
(ii) Unitemized	209403.13	289295.81
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	396573.20	543462.64
Political Party Committees	0.00	0.00
	0.00	5000.00
	7	
	396573.20	548462.64
ty Committees	0.00	0.00
Loans Received	0.00	0.00
	0.00	0.00
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	7	7 7
	4500.00	4500.00
er Federal Receipts		
vidends, Interest, etc.)	671.42	672.95
nsfers from Non-Federal and Levin Funds	7 7	
Non-Federal Account		
(from Schedule H3)	0.00	0.00
Lovin Funds (from Schodulo US)	0.00	0.00
Leviii Funds (IIOIII Schedule 115)		
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Than Political Committees (i) Itemized (use Schedule A)	Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Ollow	Calcinda Teal-to-Date
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) I ederal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party	0.00	0.00
3.	CommitteesContributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	328500.00	610500.00
	Independent Expenditures	7	
	(use Schedule E)	0.00	0.00
	Coordinated Party Expenditures (2 U.S.C. 8441a(d))		
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To:	5.55	0.00
	(a) Individuals/Persons Other Than Political Committees	555.00	655.00
		4	
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	555.00	655.00
	(444 211100 20(4), (5), 4114 (5),		7
9.	Other Disbursements	2253.85	6405.48
	L.	7	
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	5.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	T. I.B. I		
	Total Disbursements (add Lines 21(c), 22,	201000 05	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	331308.85	617560.48
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	331308.85	617560.48

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	396573.20	548462.64			
Total Contribution Refunds (from Line 28(d))	555.00	655.00			
i. Net Contributions (other than loans) (subtract Line 34 from Line 33)	396018.20	547807.64			
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00			
'. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00			

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

6 OF 227 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Miguel A Acevedo Segui Date of Receipt Mailing Address 2326 Longmoore Ct 2012 23 City State Zip Code Transaction ID: C1668291 FL 32835-5962 Orlando Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. James B Aiken Date of Receipt Mailing Address 81 Yosemite Dr 2012 04 17 City State Zip Code Transaction ID: C1642327 **New Orleans** LA 70131-8661 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Dr. James B Aiken **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Marc Gregory Amaya Date of Receipt Mailing Address 660 Vinings Estates Dr SE 2012 06 23 City Zip Code State Transaction ID: C1774606 GA Mableton 30126-5908 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Apollo MD (Powers Pointe Park) **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: **PAGE** 7 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sharon Croom Amaya Date of Receipt Mailing Address 660 Vinings Estates Dr SE 2012 City Zip Code State Transaction ID: C1774607 GA Mableton 30126-5908 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Apollo MD Powers Pointe Park **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen H Andersen Date of Receipt Mailing Address 12202 E Shangri La Rd 2012 04 10 City State Zip Code Transaction ID: C1632788 ΑZ Scottsdale 85259-3301 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Scottsdale Emer Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeffrey D Anderson Date of Receipt Mailing Address 1305 County Road 65 2012 04 18 City State Zip Code Transaction ID: C1647373 ΑL Killen 35645-5945 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee.

1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

350.00

Occupation

Emergency Physician

Aggregate Year-to-Date ▼

Name of Employer

Primary

Receipt For:

ECM Emergency Dept

Other (specify)

General

	FOR LIN
Use separate schedule(s)	(check o
for each category of the	`
Detailed Summary Page	X 11a

					PAGE		8	OF		227
(ch	(check only one)									
>	1 1a		11b		11c		12			
	13		14		15		16	;		17

	nd Statements may not be sold or used by any per- g the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Emergency Medicin	ne Political Action Committee	
Full Name (Last, First, Middle Initial) Peter Andersons Mailing Address 72749 Skyward Way		Date of Receipt
		05 24 2012
City	State Zip Code	Transaction ID : C1669366
Palm Desert	CA 92260-6028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Eisenhower Med Ctr ED	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Shobhit Arora		Date of Receipt
Mailing Address 405 Nature Ln		04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C1649196
Rockville	MD 20850-7767	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Doctors Emerg Phys	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 121 Devon Dr		04 18 2012
City Homewood	State Zip Code AL 35209-4315	Transaction ID : C1642719 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	-
Cullman Regl Med Ctr	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (ontional	l) >	650.00
TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: **PAGE** 9 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Tom Ashar Date of Receipt Mailing Address 121 Devon Dr 2012 24 City State Zip Code Transaction ID: C1669815 Homewood AL 35209-4315 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Cullman Regl Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brent Asplin Date of Receipt Mailing Address 3150 Excelsior Blvd 17 2012 04 City State Zip Code Transaction ID: C1642294 MN Minneapolis 55416-4626 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Mayo Clnc-Chair Dept of EM **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **c.** Brent Asplin Date of Receipt Mailing Address 3150 Excelsior Blvd 2012 05 22 City Zip Code State Transaction ID: C1667450 MN Minneapolis 55416-4626 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Mayo Clnc-Chair Dept of EM **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 266.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER	PAGE	. 1	10 (OF	227			
Use separate schedule(s) for each category of the	(check only one)								
Detailed Summary Page	X 11a 11b		11c		12	_			
, 0	13 14		15		16		17		

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Brent Asplin Mailing Address 3150 Excelsior Blvd City	State Zip Code	Date of Receipt M
Minneapolis FEC ID number of contributing federal political committee. Name of Employer Mayo Clnc-Chair Dept of EM Receipt For: □ Primary □ General Other (specify) ▼	MN 55416-4626 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Andrew Luke Aswegan Mailing Address 41 Forsythia Ln City Bear	State Zip Code DE 19701-6301	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer Union Hosp Receipt For: Primary General Other (specify)	Occupation Emergency Physician Aggregate Year-to-Date 1000.00	Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Bruce S Auerbach Mailing Address 211 Park St Sturdy Meml Hosp City Attleboro FEC ID number of contributing federal political committee. Name of Employer Sturdy Mem Emer Phys Receipt For: Primary General Other (specify)	State Zip Code MA 02703-3143 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M M / D D / Y 2012 Transaction ID: C1642323 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1183.33
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

227

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Bruce S Auerbach Date of Receipt Mailing Address 211 Park St Sturdy Meml Hosp 2012 22 City Zip Code State Transaction ID: C1667453 Attleboro MA 02703-3143 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Sturdy Mem Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bruce S Auerbach Date of Receipt Mailing Address 211 Park St Sturdy Meml Hosp 06 15 2012 City State Zip Code Transaction ID: C1772013 MA Attleboro 02703-3143 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Sturdy Mem Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Neal Finley Aulick II Date of Receipt Mailing Address 11 Aaronwoods Ct 2012 05 21 City Zip Code State Transaction ID: C1669783 WV Wheeling 26003-9358 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation EMP of Ohio Co PLLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Rashid J Baddoura Date of Receipt Mailing Address 120 Heights Rd 04 2012 City Zip Code State Transaction ID: C1642196 Ridgewood NJ 07450-2412 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Valley Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. D Joan Balcombe Date of Receipt Mailing Address 1054 E 5150 S 06 2012 26 City State Zip Code Transaction ID: C1774472 UT Ogden 84403-4735 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **EPIC LLC Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 2012 04 17 City State Zip Code Transaction ID: C1642277 MA **Newton Center** 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation New England Med Ctr Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.65 Other (specify) 1583.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 2012 22 City Zip Code State Transaction ID: C1667454 **Newton Center** MA 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation New England Med Ctr Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.65 Other (specify) Full Name (Last, First, Middle Initial) B. Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 2012 06 15 City State Zip Code Transaction ID: C1772021 MA **Newton Center** 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation New England Med Ctr Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.65 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy Paul Barron Date of Receipt Mailing Address 9435 Mount Vernon Cir 2012 04 17 City Zip Code State Transaction ID: C1642209 Alexandria VA 22309-3221 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation United States Army **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 416.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 14 OF	:						
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	X 11a 11b 11c 12							
,	13 14 15 16							

227

					13	1-	4	15	16	17
Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	not be sold ddress of any	or used by any political committee	person f	for the place of the licit con	purpo ntribut	se of s	oliciting m such	contribution	ons e.
NAME OF COMMITTEE (In Full) National Emergency Medicine F		-	-							
Full Name (Last, First, Middle Initial) Leigh Barrow					Date of	Rece	eipt			
Mailing Address 2824 E 25th Street	Ctoto	Zin Onde			06 T	Ш	28	/ Y	2012	Y
City Tulsa	State OK	Zip Code 74114						1774927		
	OI.	17114			Amount	of Ea	acn Re	ceipt this	s Period	
FEC ID number of contributing federal political committee.	С							-	250.0	00
Name of Employer	Occupation									
EMP	physician									
Receipt For:	1	Year-to-Date ▼	7							
Primary General	33 - 3410	,		$\neg \bot$						
Other (specify) ▼		7	0.00							
Full Name (Last, First, Middle Initial) Claudia L Barthold					Date of	Rece	∍ipt			
Mailing Address 200 S 31st Ave					M = M 06] ′ [20	/ Y	2012	Y
City	State	Zip Code			Transa	action	ո ID ։ C	1772407		
Omaha	NE	68131-14	15		Amount	of Ea	ach Red	ceipt this	s Period	
FEC ID number of contributing federal political committee.	С				Ľ.	- 7		-,	500.0	00
Name of Employer	Occupation			$\overline{}$						
UNMC	Emergency									
Receipt For:		Year-to-Date ▼	y							
Primary General		15 5410 1		-						
Other (specify) ▼		, , ,	500.00							
Full Name (Last, First, Middle Initial) Jacob Benford				[Date of	Rece	∍ipt			
Mailing Address 301 Spyglass Way					M M] ′ [27	/ Y	2012	Y
City	State	Zip Code		1	Transa	actio	n ID : C	1774950		
Aptos	CA	95003-47	51		4mount	of Ea	ach Red	ceipt this	s Period	
FEC ID number of contributing federal political committee.	С								91.4	40
Name of Employer	Occupation									
Dr. Jacob Benford	Emergency									
Receipt For:		Year-to-Date ▼	<u> </u>	$\overline{}$						
Primary General	991 09al6	to Date (-						
Other (specify) ▼		7 7	291.40							
SUBTOTAL of Receipts This Page (optional)				•					841.4	0
TOTAL This Period (last page this line number	only)			_						

FOR LINE NUMBER: PAGE 15 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jacob Benford Date of Receipt Mailing Address 301 Spyglass Way 2012 06 City State Zip Code Transaction ID: C1776130 CA Aptos 95003-4751 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Dr. Jacob Benford **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 291.40 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew I Bern Date of Receipt Mailing Address 9846 NW 18th St 17 2012 04 City State Zip Code Transaction ID: C1642280 **Coral Springs** FL 33071-5826 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Inphynet Team Hlth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Andrew I Bern Date of Receipt Mailing Address 9846 NW 18th St 2012 05 22 City State Zip Code Transaction ID: C1667456 FL **Coral Springs** 33071-5826 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Inphynet Team HIth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 266.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Andrew I Bern Date of Receipt Mailing Address 9846 NW 18th St 2012 City State Zip Code Transaction ID: C1772016 FL **Coral Springs** 33071-5826 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Inphynet Team HIth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Benjamin Bernstein Date of Receipt Mailing Address 15 Merrivale Rd 04 2012 22 City State Zip Code Transaction ID: C1644525 NY **Great Neck** 11021-4924 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael Bessette Date of Receipt Mailing Address 651 W Mount Pleasant Ave 2012 06 15 **EMA** City Zip Code State Transaction ID: C1772319 NJ Livingston 07039-1600 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation **EMA Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2083.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sheila D Best Date of Receipt Mailing Address 4024 Sharon Woods Dr 2012 08 City Zip Code State Transaction ID: C1656813 GΑ Powder Spgs 30127-2822 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Sheila D Best, MD **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sheila D Best Date of Receipt Mailing Address 4024 Sharon Woods Dr 06 26 2012 City State Zip Code Transaction ID: C1776103 GA Powder Spgs 30127-2822 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Sheila D Best, MD **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) c. John D Bibb Date of Receipt Mailing Address 16449 Akron St 2012 04 16 City State Zip Code Transaction ID: C1637982 CA Pacific Plsds 90272-2304 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR	R LINE	NU	IMBER	:	PAGE	_ 1	18 C)F	227
Use separate schedule(s)	(che	eck only	or or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) Stewart E Bick Mailing Address 1149 W 116th St		Date of Receipt
City Carmel	State Zip Code IN 46032-9512	04 05 2012 Transaction ID : C1625962 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St Vincent Hosp & Hlth Cre Ctr	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dale Scott Birenbaum Mailing Address 3298 Kentshire Blvd	·	Date of Receipt
City Ocoee	State Zip Code FL 34761-4621	05 23 2012 Transaction ID : C1668405 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General	Occupation Emergency Physician Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial)	1000.00	
Michael D Bishop Mailing Address 1155 W 3rd St Dynamic Medical Practice City	State Zip Code	Date of Receipt 06 19 2012 Transaction ID : C1772214
Bloomington FEC ID number of contributing federal political committee.	IN 47404-5016	Amount of Each Receipt this Period 500.00
Name of Employer Dynamic medical Practice Services Receipt For: Primary General	Occupation Emergency Physician Aggregate Year-to-Date ▼	
	500.00	1750.00
TOTAL This Period (last page this line numb	per only)	

	FOR LINE	NUMBER	: PAGE	E 19 C)F 2
Use separate schedule(s)	(check only	y one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummun, rago	13	14	15	16	

Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Gregory J Bjerke Mailing Address 2973 Peterson Pkwy N City Fargo FEC ID number of contributing federal political committee. Name of Employer Sanford-Meritcare Receipt For: Primary Other (specify)	State Zip Code ND 58102-1752 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 06 18 2012 Transaction ID: C1772003 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Joseph Bledsoe Mailing Address 8888 Upper Lando Ln City Park City FEC ID number of contributing federal political committee. Name of Employer Univ of UT Hosp & Clinics ED Receipt For: Primary General Other (specify)	State Zip Code UT 84098-5847 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 04 18 2012 Transaction ID: C1642724 Amount of Each Receipt this Period 200.00
Full Name (Last, First, Middle Initial) Joseph Bledsoe Mailing Address 8888 Upper Lando Ln City Park City FEC ID number of contributing federal political committee. Name of Employer Univ of UT Hosp & Clinics ED Receipt For: Primary General Other (specify)	State Zip Code UT 84098-5847 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 06 08 2012 Transaction ID : C1767839 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional	l) >	600.00
TOTAL This Period (last page this line num	ber only)	

	FOR LINE I	NUMBER:	PAGE	E 20 OF	22
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou oumnary r ago	13	14	15	16	

	Statements may not be sold or used by any personance and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Frederick C Blum Mailing Address 1470 Point Marion Rd City Morgantown FEC ID number of contributing federal political committee. Name of Employer WV Univ Hosps Receipt For: Primary General Other (specify)	State Zip Code WV 26508-1454 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 04 17 2012 Transaction ID: C1642288 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Frederick C Blum Mailing Address 1470 Point Marion Rd City Morgantown FEC ID number of contributing federal political committee. Name of Employer WV Univ Hosps Receipt For: Primary General Other (specify)	State Zip Code WV 26508-1454 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 05 23 2012 Transaction ID : C1668418 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Frederick C Blum Mailing Address 1470 Point Marion Rd City Morgantown FEC ID number of contributing federal political committee. Name of Employer WV Univ Hosps Receipt For: Primary General Other (specify)	State Zip Code WV 26508-1454 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M M M / D D / 2012 Transaction ID : C1772008 Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	•	249.99
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 21 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brian M Boesiger Date of Receipt Mailing Address 419 E Cave Ct 04 05 2012 City State Zip Code Transaction ID: C1625956 ID Boise 83702-5064 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation ID Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jason Bolden Date of Receipt Mailing Address 3011 Rock Springs Rd 2012 05 24 City State Zip Code Transaction ID: C1669368 NC Charlotte 28226-7357 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Jason Bolden, MD **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ethan A Booker Date of Receipt Mailing Address 417 T St NW 2012 05 24 City Zip Code State Transaction ID: C1669373 DC Washington 20001-1808 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Washington Hosp Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	22 OF	227
Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 11b	11c	12	
,,	13 14	15	16	17

17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Keenan M Bora Date of Receipt Mailing Address 3475 Ridgeline Ct 04 2012 City State Zip Code Transaction ID: C1642329 48105-2500 Ann Arbor MI Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Wayne State Univ/Detroit Rec **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Samuel Francis Bosco Date of Receipt Mailing Address 6 Fox Glove Ct 05 2012 11 City State Zip Code Transaction ID: C1658414 NY Wynantskill 12198-7801 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation St Peters Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Bradford J Bowls Date of Receipt Mailing Address 121 NW Ivanhoe Blvd 2012 05 23

Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

Zip Code

32804-5958

SUBTOTAL of Receipts This Page (optional)		Ī
		T
TOTAL This Period (last page this line number only)		1

State

FL

9 9 9

2250.00

Transaction ID: C1668383

City

Orlando

		PAGE 23 OF 227
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b	11c 12
, ,		15 16 17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Alkesh Brahmbhatt		Date of Receipt
Mailing Address 1441 Langham Ter		M = M / D = D / Y = Y = Y
City	State Zip Code	05 23 2012 Transaction ID : C1668411
Lake Mary	FL 32746-1967	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	
FL Emer Phys Kang & Assoc	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Sabina A Braithwaite		Date of Receipt
Mailing Address PO Box 780809		M = M / D = D / Y = Y = Y
City	State Zip Code	04 17 2012
Wichita	KS 67278-0809	Transaction ID : C1642289 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Univ of VA, ED	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) C. Sabina A Braithwaite		Date of Receipt
Mailing Address PO Box 780809		05 22 2012
City	State Zip Code	Transaction ID : C1667459
Wichita	KS 67278-0809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Univ of VA, ED	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	499.98	
SUBTOTAL of Receipts This Page (optional)	·····	1166.66
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 24 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sabina A Braithwaite Date of Receipt Mailing Address PO Box 780809 2012 City Zip Code State Transaction ID: C1772028 KS Wichita 67278-0809 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Univ of VA. ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Francine H Brooks Date of Receipt Mailing Address 21 Fair St 2012 06 20 City State Zip Code Transaction ID: C1773471 NY Cold Spring 10516-3005 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Vassar Brothers Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Tracy Brown Date of Receipt Mailing Address 12528 Sr 78 80 2012 05 City Zip Code State Transaction ID: C1656815 IL Havana 62644-6866 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation OSF St Francis Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1333.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN	E MOMBER	: PAGI	= 25 Or	- 221
(check or	nly one)			
X 11a	11b	11c	12	
13	14	15	16	17

	and Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Emergency Medicir	ne Political Action Committee	
Full Name (Last, First, Middle Initial) Yvonne Marie Brutger Mailing Address 9615 Wyoming Cir City Minneapolis FEC ID number of contributing federal political committee. Name of Employer North Mem Emer Phys Receipt For: Primary General Other (specify)	State Zip Code MN 55438-1628 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt Mark
Full Name (Last, First, Middle Initial) John William Burger Mailing Address 58 Norfolk Ave City Clarendon HIs FEC ID number of contributing federal political committee. Name of Employer Johns Hopkins Hosp Receipt For: Primary General Other (specify)	State Zip Code IL 60514-1212 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Michael Burton Mailing Address 3875 Geist Rd City Fairbanks FEC ID number of contributing federal political committee. Name of Employer Golden Heart Emer Phys Receipt For: Primary General Other (specify)	State Zip Code AK 99709-3549 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 06 02 2012 Transaction ID : C1757359 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional	al)	1000.00
TOTAL This Period (last page this line nun	nber only)	

FOR LINE NUMBER: PAGE 26 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Joseph J Calabro Date of Receipt Mailing Address 15 Hance Rd 2012 City Zip Code State Transaction ID: C1658413 Fair Haven NJ 07704-3206 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation PPE **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jennifer E Callaway Date of Receipt Mailing Address 1528 Dilworth Rd 06 25 2012 City State Zip Code Transaction ID: C1773484 NC Charlotte 28203-4823 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Winchester Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Jorge L Cambo Date of Receipt Mailing Address 1143 Raintree Pl 2012 05 01 City State Zip Code Transaction ID: C1651311 FL Winter Park 32789-2563 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **Emer Phys Spec Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 27 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Eva M Carey Date of Receipt Mailing Address 16415 Southcliff Ridge Cir 2012 City Zip Code State Transaction ID: C1772144 ΑK Anchorage 99516-5416 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Dr. Eva M Carey **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael L Carius Date of Receipt Mailing Address 34 Maple St Norwalk Hosp ED Chairman 2012 04 02 City State Zip Code Transaction ID: C1623320 CT Norwalk 06850-3815 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Norwalk Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin P Carmen Date of Receipt Mailing Address 1398 Hampton Knoll Dr 2012 05 03 City State Zip Code Transaction ID: C1654644 OH Akron 44313-4890 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Brody Sch of Med @ ECU, ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE I	NUMBER:	: PAGE	E 28 O	F 2
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummuny r ugo	13	14	15	16	

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Jesse Caron Mailing Address 500 Winderley PI FL Emer Phys City Maitland FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code FL 32751-7406 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 23 2012 Transaction ID : C1668395 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Jennifer Casaletto Mailing Address 524 Stonewater Bay Ln City Mount Holly FEC ID number of contributing federal political committee. Name of Employer Medpro Emer Phys Receipt For: Primary General Other (specify)	State Zip Code NC 28120-9168 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 06 26 2012 Transaction ID : C1774483 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Michael Cassara Mailing Address 5 Collins Ave City Kings Park FEC ID number of contributing federal political committee. Name of Employer North Shore Univ Hosp Emer Phys Receipt For: Primary General Other (specify)	State Zip Code NY 11754-2601 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional).	_	2500.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 29 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael Cetta Date of Receipt Mailing Address 16 Piney Glen Ct 07 2012 City Zip Code State Transaction ID: C1655015 MD Potomac 20854-1411 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Name of Employer Occupation MEP **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kahang Lee Chan Date of Receipt Mailing Address 1618 Bridgewater Dr 2012 05 23 City State Zip Code Transaction ID: C1668409 FL Lake Mary 32746-4103 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mary Anna Chiu Date of Receipt Mailing Address 10220 N Orchard Ln 2012 06 19 City Zip Code State Transaction ID: C1772317 WA Spokane 99208-5523 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Name of Employer Occupation **EPS Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 3150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER	:	PAGE	30 O	F 22
Use separate schedule(s)	(check only one)				
for each category of the Detailed Summary Page	X 11a 11b		11c	12	
zotanou cummuny r ago	13 14		15	16	17

Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any per- the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Michael C Christopher Mailing Address 6149 E Wilshire Dr City Scottsdale FEC ID number of contributing federal political committee. Name of Employer EMPower Emer Phys PC Receipt For: Primary General	State Zip Code AZ 85257-1959 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 04 17 2012 Transaction ID : C1642293 Amount of Each Receipt this Period 83.33
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael C Christopher	499.98	Date of Receipt
Mailing Address 6149 E Wilshire Dr City Scottsdale	State Zip Code AZ 85257-1959	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer EMPower Emer Phys PC Receipt For: Primary Other (specify)	Occupation Emergency Physician Aggregate Year-to-Date ▼	83.33
Full Name (Last, First, Middle Initial) Michael C Christopher Mailing Address 6149 E Wilshire Dr	Chate Tip Code	Date of Receipt 06 15 2012
City Scottsdale FEC ID number of contributing federal political committee. Name of Employer EMPower Emer Phys PC Receipt For: Primary General Other (specify) ▼	State Zip Code AZ 85257-1959 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	249.99
TOTAL This Period (last page this line num)	per only)	

	FOR LINE NUMBER:	PAGE	
Use separate schedule(s) for each category of the	(check only one)		
Detailed Summary Page	X 11a 11b	11c	
, ,	1		

31 OF

227

12 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) L Anthony Cirillo Date of Receipt Mailing Address 91 Woodridge Dr 04 2012 City State Zip Code Transaction ID: C1642330 RΙ Saunderstown 02874-1943 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Emer Med Phys Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Leonardo Cisneros Date of Receipt Mailing Address 2365 Forrest Rd 2012 05 23 City State Zip Code Transaction ID: C1668381 Winter Park FL 32789-6028 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial)

c. Carol L Clark Date of Receipt Mailing Address 3601 W 13 Mile Rd 2012 04 17 William Beaumont Hosp ED City Zip Code State Transaction ID: C1642331 MI Royal Oak 48073-6712 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation William Beaumont Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 32 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Nathaniel W Clark Date of Receipt Mailing Address 1216 E Newton St 04 05 2012 City Zip Code State Transaction ID: C1625960 WA Seattle 98102-4104 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Dr. Nathaniel W Clark **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** R Carter Clements Date of Receipt Mailing Address 5558 Taft Ave 17 2012 04 City State Zip Code Transaction ID: C1642296 CA Oakland 94618-1519 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation OakCare Med Grp Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. R Carter Clements Date of Receipt Mailing Address 5558 Taft Ave 2012 05 22 Zip Code City State Transaction ID: C1667473 CA Oakland 94618-1519 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation OakCare Med Grp Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 666.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FO	R LINE	NU	IMBER	:	PAGE	3	3 OI	F	22
Use separate schedule(s)	(che	eck only	or or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		717

	nd Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Emergency Medicin	ne Political Action Committee	
Full Name (Last, First, Middle Initial) R Carter Clements Mailing Address 5558 Taft Ave		Date of Receipt
City Oakland	State Zip Code CA 94618-1519	06 15 2012 Transaction ID : C1772012 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer OakCare Med Grp Inc	Occupation Emergency Physician	83.33
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) Nathan J Cleveland Mailing Address 10458 Hope Mills Dr		Date of Receipt 05 09 2012
City Las Vegas FEC ID number of contributing federal political committee.	State Zip Code NV 89135-2865	Transaction ID : C1666246 Amount of Each Receipt this Period 100.00
Name of Employer Denver HIth Med Ctr Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 350.00	-
Full Name (Last, First, Middle Initial) Nathan J Cleveland Mailing Address 10458 Hope Mills Dr		Date of Receipt 05 24 2012
City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Denver Hlth Med Ctr Receipt For: Primary General	State Zip Code NV 89135-2865 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Transaction ID : C1669364 Amount of Each Receipt this Period 250.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	350.00	433.33
TOTAL This Period (last page this line num	iber only)	

	FOR LINE	NUMBER	: PAGE	E 34 C)F 2
Use separate schedule(s)	(check only	/ one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummun, rago	13	14	15	16	

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Clinton Coil Mailing Address 1000 W Carson St LAC Harbor UCLA Med Ctr City Torrance FEC ID number of contributing federal political committee. Name of Employer LAC Harbor UCLA Med Ctr Receipt For: Primary General Other (specify)	State Zip Code CA 90502-2004 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Lloyd G Connelly Mailing Address 1578 SE Lambert St City Portland FEC ID number of contributing federal political committee. Name of Employer Oregon Hith and Science Univ Receipt For: Primary General Other (specify)	State Zip Code OR 97202-6040 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Helene Connolly Mailing Address 500 Thatcher Ave City River Forest FEC ID number of contributing federal political committee. Name of Employer Mercy Hosp & Med Ctr Receipt For: Primary General Other (specify)	State Zip Code IL 60305-1625 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 35 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Helene Connolly Date of Receipt Mailing Address 500 Thatcher Ave 2012 26 City State Zip Code Transaction ID: C1774482 60305-1625 River Forest IL Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Mercy Hosp & Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** David Thomas Cook Date of Receipt Mailing Address 809 Bridgetown Pass 2012 06 26 City State Zip Code Transaction ID: C1774476 SC Mt Pleasant 29464-8330 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Christiana Care Hlth Svcs **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Raymond Cooney Date of Receipt Mailing Address 210 Concord St 2012 05 22 City Zip Code State Transaction ID: C1667438 PΑ Indiana 15701-2401 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Allegheny Gen Hos **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	36	OF
Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 11b	11c	12	
, 0	1 10 1 14	15	16	. Г

227

		13 14 15 16 17
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Marco Coppola		Date of Receipt
Mailing Address 7105 Waldon Ct		05 01 2012
City Colleyville	State Zip Code TX 76034-7319	Transaction ID : C1666164 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Questcare Med Svcs	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
Full Name (Last, First, Middle Initial) 3. Christopher Corbit		Date of Receipt
Mailing Address 1075 Mornington Cir		05 13 2012
City	State Zip Code	Transaction ID : C1666239
Uniontown	OH 44685-6244	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Akron Gen Med Ctr Dept of EM	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. Robert J Cox		Date of Receipt
Mailing Address 817 Thomaston St		05 22 2012
City	State Zip Code	Transaction ID : C1667474
Barnesville	GA 30204-1729	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
EmergiNet/Summit Med Svcs	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1350.00
TOTAL This Period (last page this line number	only)	

		LINE			:	PAGE	: 3	37	OF	22	27
Use separate schedule(s) for each category of the	(che	ck only	or	ıe)							
Detailed Summary Page	X	11a		11b		11c		12			
zotanou oumnary r ago		13		14		15		16	Γ	7	17

	Statements may not be sold or used by any personal he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Jonna Wray Cubin Mailing Address 1800 Elkhorn Valley Dr		Date of Receipt
City Casper	State Zip Code WY 82609-4634	05 11 2012 Transaction ID : C1658415 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ivinson Meml Hosp Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. James Michael Cusick Mailing Address 1077 Race St		Date of Receipt 04 17 2012
City Denver FEC ID number of contributing federal political committee.	State Zip Code CO 80206-2832	Transaction ID : C1642284 Amount of Each Receipt this Period 83.33
Name of Employer Natl Med Dir AMR Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) C. James Michael Cusick		Date of Receipt
Mailing Address 1077 Race St		05 22 2012
City Denver	State Zip Code CO 80206-2832	Transaction ID : C1667477 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Natl Med Dir AMR Receipt For:	Occupation Emergency Physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	499.98	
SUBTOTAL of Receipts This Page (optional).	<u> </u>	416.66

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 38 OF 227

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Stat or for commercial purposes, other than using the na		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Emergency Medicine Po	litical Action Committee	
Natl Med Dir AMR Receipt For: Primary General Other (specify) ▼	State Zip Code CO 80206-2832 C C C C C C C C C C C C C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Creighton Univ Med Ctr EM Dept	State Zip Code NE 68154-3444 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Falmouth Hosp E	State Zip Code MA 02536-4125 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 04 05 2012 Transaction ID : C1625954 Amount of Each Receipt this Period 300.00
SUBTOTAL of Receipts This Page (optional)		633.33

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 39 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Steven Edward Davis Date of Receipt Mailing Address 444 Dillon Cir NE 01 2012 City Zip Code State Transaction ID: C1666247 OH North Canton 44720-7863 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Canton Aultman Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 2012 04 16 City State Zip Code Transaction ID: C1642574 VA Abingdon 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Brody Schl of Med @ ECU ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 2012 05 22 City Zip Code State Transaction ID: C1667479 Abingdon VA 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Brody Schl of Med @ ECU ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	40 OF	227
Use separate schedule(s) for each category of the	(check only one)		_	
Detailed Summary Page	X 11a 11b	11c	12	_
, ,	I 13 14	15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Carrie DeMoor Date of Receipt Mailing Address 4701 Paxton Ln 04 05 2012 City State Zip Code Transaction ID: C1625950 75034-2209 TX Frisco Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation TX Tech Hlth Sci Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 372.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carrie DeMoor Date of Receipt Mailing Address 4701 Paxton Ln 04 2012 27 City State Zip Code Transaction ID: C1649301 TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 8.00 federal political committee. Name of Employer Occupation TX Tech Hlth Sci Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 372.00 Other (specify) Full Name (Last, First, Middle Initial) c. fred dennis MD, MBA, F Date of Receipt Mailing Address 22287 mulholland hwy. 2012 04 17 #187 City State Zip Code Transaction ID: C1642276 CA calabasas 91302 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	·····		Ξ	7	Ξ	Ξ	7	Ξ	39′	1.33	
TOTAL This Period (last page this line number	only)	.	Ξ	7	_	Ξ	7	_			

499.98

C

Occupation

Emergency Physician

Aggregate Year-to-Date ▼

83.33

FEC ID number of contributing

General

federal political committee.

Other (specify)

Name of Employer

Primary

EmCare

Receipt For:

FOR LINE NUMBER: PAGE 41 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) fred dennis MD, MBA, F Date of Receipt Mailing Address 22287 mulholland hwy. #187 2012 22 City State Zip Code Transaction ID: C1667480 CA calabasas 91302 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **EmCare Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. fred dennis MD, MBA, F Date of Receipt Mailing Address 22287 mulholland hwy. #187 06 15 2012 City State Zip Code Transaction ID: C1772015 CA calabasas 91302 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **EmCare Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Paul DePonte Date of Receipt Mailing Address 107 Baytree Ct 2012 05 23 City State Zip Code Transaction ID: C1668386 FL Winter Spgs 32708-5122 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1166.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

		LINE			:	PAGE	 2	OF	227
Use separate schedule(s) for each category of the	` .	ck only	or	, i		ı			
Detailed Summary Page	X	11a		11b		11c	12		
		13		14		15	16	;	17

	Statements may not be sold or used by any persie name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Laurence R DesRochers Mailing Address 640 Harbor Rd City Brick FEC ID number of contributing federal political committee. Name of Employer Jersey Emer Med Spec Receipt For: Primary General Other (specify)	State Zip Code NJ 08724-4716 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 04 17 2012 Transaction ID: C1642324 Amount of Each Receipt this Period 125.00
Full Name (Last, First, Middle Initial) William D Dicindio Mailing Address 124 Erica Ct City Swedesboro FEC ID number of contributing federal political committee. Name of Employer South Jersey Healthcare Receipt For: Primary General Other (specify)	State Zip Code NJ 08085-1823 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 05 07 2012 Transaction ID : C1666188 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) William D Dicindio Mailing Address 124 Erica Ct City Swedesboro FEC ID number of contributing federal political committee. Name of Employer South Jersey Healthcare Receipt For: Primary General Other (specify)	State Zip Code NJ 08085-1823 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 05 11 2012 Transaction ID: C1658416 Amount of Each Receipt this Period 200.00
SUBTOTAL of Receipts This Page (optional)	>	425.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 43 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) William D Dicindio Date of Receipt Mailing Address 124 Erica Ct 2012 27 City Zip Code State Transaction ID: C1775262 08085-1823 Swedesboro NJ Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation South Jersey Healthcare **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Lewis Dickson Date of Receipt Mailing Address ST14 Lake Cherokee 2012 04 16 City State Zip Code Transaction ID: C1642578 TX Henderson 75652-9732 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Good Sheperd Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Lewis Dickson Date of Receipt Mailing Address ST14 Lake Cherokee 2012 05 24 City Zip Code State Transaction ID: C1669378 TX Henderson 75652-9732 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Good Sheperd Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	1
Use separate schedule(s)	(check only one)	_
for each category of the		Π.
Detailed Summary Page	X 11a 11b	1

	FOR LINE	NUMBER:	PAGE	44 OF	227
e(s)	(check only	one)			
ne	X 11a	11b	11c	12	
ge	13	14	15	16	17

	nd Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Jno Jacob Disch Mailing Address 3892 Savoy Dr City Cleveland	State Zip Code OH 44126-1766	Date of Receipt 06 18 2012 Transaction ID: C1772340 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Akron Gen Med Ctr Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	500.00
Full Name (Last, First, Middle Initial) Marc M Dreier Mailing Address 295 Richards Rd City	State Zip Code	Date of Receipt 04 24 2012 Transaction ID : C1644911
Ridgewood FEC ID number of contributing federal political committee. Name of Employer The Valley Hosp	NJ 07450-1009 C Occupation Emergency Physician	Amount of Each Receipt this Period 2500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Laurie C Drill-Mellum Mailing Address 5850 County Road 155		Date of Receipt 05 01 2012
City Waconia FEC ID number of contributing federal political committee. Name of Employer Emer Phys & Consultants Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MN 55387-9654 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Transaction ID : C1651328 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional	1)	3250.00
TOTAL This Period (last page this line num	nber only).	

FOR LINE NUMBER: PAGE 45 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Carlos Gomez Duarte Date of Receipt Mailing Address 6N969 Whispering Trl 2012 24 City State Zip Code Transaction ID: C1669775 Saint Charles IL 60175-6363 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Valley Emergency Care Management **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. James R Dudley Date of Receipt Mailing Address 618 Hospital Rd Riverside Tappahannock Hosp 2012 04 17 City State Zip Code Transaction ID: C1642272 VA Tappahannock 22560-5000 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Riverside Tappahannock Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. James R Dudley Date of Receipt Mailing Address 618 Hospital Rd 2012 05 22 Riverside Tappahannock Hosp City Zip Code State Transaction ID: C1667481 Tappahannock VA 22560-5000 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Riverside Tappahannock Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	_	LINE ck only	_		: [PAGE	46 OI	F 227	-
ILIVIIZED RECEIF 13	Detailed Summary Page	X	11a 13	\vdash	11b 14		11c 15	12 16	17	,
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a										
NAME OF COMMITTEE (In Full) National Emergency Medicine Political A	ction Committee									
Full Name (Last, First, Middle Initial) James R Dudley		D	ate of	Rec	ceipt					
Martin or Anthony and Art 1997 to 1997										

Full Name (Last, First, Middle Initial) James R Dudley		Date of Receipt
Mailing Address 618 Hospital Rd Riverside Tappahannock		06 15 , 2012
City	State Zip Code	Transaction ID : C1772029
Tappahannock	VA 22560-5000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Riverside Tappahannock Hosp	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Robert Brian Dunne		Date of Receipt
Mailing Address 51800 9 Mile Rd		06 05 2012
City	State Zip Code	Transaction ID : C1757425
Northville	MI 48167-9773	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	7
Emer Med Specialists PC	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) James S Eadie		Date of Receipt
Mailing Address 201 N Lowell Ln		06 28 2012
City	State Zip Code	Transaction ID : C1775057
Austin	TX 78733-4223	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Sante Ventures	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional	al)	2050.00

	FOR LINE	NUMBER	: Page	E 47 O	F
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
,	13	14	15	16	Г

227

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) William C Eidenmuller Mailing Address 3300 Vancouver Dr City Modesto FEC ID number of contributing federal political committee. Name of Employer Kern Medical Center Receipt For: Primary General Other (specify)	State Zip Code CA 95355-9755 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 241.40	Date of Receipt 06 01 2012 Transaction ID : C1757374 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) William C Eidenmuller Mailing Address 3300 Vancouver Dr City Modesto FEC ID number of contributing federal political committee. Name of Employer Kern Medical Center Receipt For: Primary General Other (specify)	State Zip Code CA 95355-9755 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 241.40	Date of Receipt M M M / 27 2012 Transaction ID : C1775211 Amount of Each Receipt this Period 91.40
Full Name (Last, First, Middle Initial) Emile EI-Shammaa Mailing Address 287 Bristol Way City Worthington FEC ID number of contributing federal political committee. Name of Employer OH State Univ Med Ctr Receipt For: Primary General Other (specify)	State Zip Code OH 43085-3272 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M 04 17 2012 Transaction ID : C1642584 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<u> </u>	291.40
TOTAL This Period (last page this line number	only)	7

FOR LINE NUMBER: PAGE 48 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Emile El-Shammaa Date of Receipt Mailing Address 287 Bristol Way 01 2012 City Zip Code State Transaction ID: C1651319 OH 43085-3272 Worthington Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation OH State Univ Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Randy Engelman Date of Receipt Mailing Address 2918 E 97th Ct 05 2012 24 City State Zip Code Transaction ID: C1669381 OK Tulsa 74137-7367 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Information Requested **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Angelo L Falcone Date of Receipt Mailing Address 12410 Milestone Center Dr 2012 Med Emer Prof Llc 05 07 City Zip Code State Transaction ID: C1655013 MD Germantown 20876-7103 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 С federal political committee. Name of Employer Occupation Montgomery Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	: PAGE	E 49 C)F 2
Use separate schedule(s)	(check only	/ one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummun, rago	13	14	15	16	

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Jay L Falk Mailing Address Orland Regional Medical Cer 86 W Underwood St #200 City Orlando FEC ID number of contributing federal political committee. Name of Employer Orlando Reg Med Ctr Receipt For: Primary Other (specify) General Other (specify)	State Zip Code FL 32806 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Richard M Feldman Mailing Address 836 W Wellington Ave Advocate IL Masonic Med Ct City Chicago FEC ID number of contributing federal political committee. Name of Employer Advocate IL Masonic Med Ctr ED Receipt For: Primary General Other (specify)		Date of Receipt M M M / 2012 Transaction ID: C1642213 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Claudine S Feliciano Mailing Address 639 Bobwhite Ln City New Lenox FEC ID number of contributing federal political committee. Name of Employer Henry Ford Macomb-Warren Hosp Receipt For: Primary General Other (specify)	State Zip Code IL 60451-8595 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 05 24 2012 Transaction ID : C1669363 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	1500.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 50 OF 227

	. 0			IVIDEII	•	1.7.00	- `		_	
	(check only one)									
or each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Scott E Felten Mailing Address 11122 S Harvard Ave City Tulsa FEC ID number of contributing federal political committee. Name of Employer St Francis Hosp Receipt For: Primary General Other (specify)	State Zip Code OK 74137-7810 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 24 2012 Transaction ID: C1669382 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Brent M Felton Mailing Address 1536 Woodside Dr City East Lansing FEC ID number of contributing federal political committee. Name of Employer Phys Assoc PC Receipt For: Primary General Other (specify)	State Zip Code MI 48823-2950 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D D / 2012 Transaction ID: C1765978 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) John T Finnell II Mailing Address 505 S 5th St City Zionsville FEC ID number of contributing federal political committee. Name of Employer Indiana Univ Schl of Med Receipt For: Primary General Other (specify)	State Zip Code IN 46077-1745 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 04 17 2012 Transaction ID: C1642278 Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	>	1583.33
TOTAL This Period (last page this line number	only)	

	FOR	LINE I	NU	MBER	:	PAGE	5	51 C)F	22
Use separate schedule(s)	(chec	k only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
,,		13		14		15		16		717

	nd Statements may not be sold or used by any person the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) John T Finnell II Mailing Address 505 S 5th St City Zionsville FEC ID number of contributing federal political committee. Name of Employer Indiana Univ Schl of Med Receipt For: Primary General Other (specify)	State Zip Code IN 46077-1745 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M
Full Name (Last, First, Middle Initial) John T Finnell II Mailing Address 505 S 5th St City Zionsville FEC ID number of contributing federal political committee. Name of Employer Indiana Univ Schl of Med Receipt For: Primary General Other (specify)	State Zip Code IN 46077-1745 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 06 15 2012 Transaction ID: C1772027 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Diana L Fite Mailing Address 15806 Maple Falls Ct City Tomball FEC ID number of contributing federal political committee. Name of Employer Meth Willowbrook Hosp ED Receipt For: Primary General Other (specify)	State Zip Code TX 77377-8762 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 540.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional	l) >	256.66
TOTAL This Period (last page this line num	ber only)	

	FOR LIN			PAGE	52	OF	227		
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X 11a	1	1b	11c	12	2			
zotanou cummun, rugo	13	14	4	15	1	3 [17		

		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Statements may not be sold or used by any persthe name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Diana L Fite Mailing Address 15806 Maple Falls Ct		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Tomball FEC ID number of contributing federal political committee.	State Zip Code TX 77377-8762	Transaction ID : C1667483 Amount of Each Receipt this Period 90.00
Name of Employer Meth Willowbrook Hosp ED Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 540.00	-
Full Name (Last, First, Middle Initial) B. Diana L Fite Mailing Address 15806 Maple Falls Ct		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tomball FEC ID number of contributing federal political committee.	State Zip Code TX 77377-8762	Transaction ID : C1772010 Amount of Each Receipt this Period 90.00
Name of Employer Meth Willowbrook Hosp ED Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 540.00	_
Full Name (Last, First, Middle Initial) Juan Francisco Fitz Mailing Address 6003 84th St		Date of Receipt 04 17 2012
City Lubbock FEC ID number of contributing federal political committee. Name of Employer Covenant Med Grp Receipt For: Primary General Other (specify)	State Zip Code TX 79424-3686 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.98	Transaction ID : C1642279 Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional).		263.33
TOTAL This Period (last page this line number	`	

	FOR LINE NUM	IBER:	PAGE 5	3 OF	
Use separate schedule(s)	(check only one)) _			_
for each category of the Detailed Summary Page	X 11a 1	1b 1	11c	12	
Detailed Guillinary 1 age	13 1	4 🗔	15	16	_

227

			13	14 15	16	17
Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) National Emergency Medicine F	olitical Action Com	mittee				
Full Name (Last, First, Middle Initial) 1. Juan Francisco Fitz			Date of F	Receipt		
Mailing Address 6003 84th St			05	/ 07 /	2012	Y
City Lubbock	State Zip Code TX 79424-368	86	Transac	ction ID : C166	6147	
FEC ID number of contributing	C 79424-300		_ Amount o	of Each Receip	t this Period 50.0	00
federal political committee.				7	50.0	
Name of Employer Covenant Med Grp	Occupation Emergency Physician					
Receipt For: Primary General	Aggregate Year-to-Date ▼	7				
Other (specify) ▼		549.98				
Full Name (Last, First, Middle Initial) 3. Juan Francisco Fitz			Date of F	Receipt		
Mailing Address 6003 84th St			M M M 05	22	2012	Y
City	State Zip Code			ction ID : C166		
Lubbock FEC ID number of contributing federal political committee.	TX 79424-368	50	_ Amount o	of Each Receip	t this Period 83.3	33
Name of Employer	Occupation			7		
Covenant Med Grp	Emergency Physician					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼		549.98				
Full Name (Last, First, Middle Initial) C. Juan Francisco Fitz			Date of F	Receipt		
Mailing Address 6003 84th St			06	15	2012	Y
City Lubbock	State Zip Code TX 79424-368	86		ction ID : C177 of Each Receip		
FEC ID number of contributing federal political committee.	C		Amount	or Zaon Necelp	83.3	33
Name of Employer	Occupation		-			
Covenant Med Grp	Emergency Physician		_			
Receipt For: Primary General	Aggregate Year-to-Date ▼	7				
Other (specify) ▼		549.98				
SUBTOTAL of Receipts This Page (optional)		>		7	216.6	66
TOTAL This Period (last page this line number of	nly)			7		

FOR LINE NUMBER: PAGE 54 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kelly Foley Date of Receipt Mailing Address 1133 Pond Cypress Dr 04 2012 City State Zip Code Transaction ID: C1642321 VA Virginia Bch 23455-6859 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Emer Phys of Tidewater **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Kelly Foley Date of Receipt Mailing Address 1133 Pond Cypress Dr 2012 05 22 City State Zip Code Transaction ID: C1667485 VA Virginia Bch 23455-6859 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Emer Phys of Tidewater **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Kelly Foley Date of Receipt Mailing Address 1133 Pond Cypress Dr 2012 06 15 City State Zip Code Transaction ID: C1772032 Virginia Bch VA 23455-6859 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation **Emer Phys of Tidewater Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER:	PAGE	55 OF	227
Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	16	17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Marsha D Ford Mailing Address PO Box 32861 Carolinas Med Ctr ED City Charlotte FEC ID number of contributing federal political committee. Name of Employer Carolinas Med Ctr ED Receipt For: Primary General Other (specify)	State Zip Code NC 28232-2861 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / 2012 Transaction ID: C1642273 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Marsha D Ford Mailing Address PO Box 32861 Carolinas Med Ctr ED City Charlotte FEC ID number of contributing federal political committee. Name of Employer Carolinas Med Ctr ED Receipt For: Primary General Other (specify)	State Zip Code NC 28232-2861 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 05 22 2012 Transaction ID: C1667486 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Marsha D Ford Mailing Address PO Box 32861 Carolinas Med Ctr ED City Charlotte FEC ID number of contributing federal political committee. Name of Employer Carolinas Med Ctr ED Receipt For: Primary General Other (specify)	State Zip Code NC 28232-2861 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / 2012 Transaction ID : C1772011 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)	>	150.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 12 11c

56 OF 227 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Scott H Freedman Date of Receipt Mailing Address 12814 Doe Ln 07 2012 City Zip Code State Transaction ID: C1655016 MD Gaithersburg 20878-6105 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation MEP **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dan BG Freess Date of Receipt Mailing Address 612 Fern St 2012 05 22 City State Zip Code Transaction ID: C1667425 West Hartford CT 06107-1417 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Univ Connecticut Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Vidor E Friedman Date of Receipt Mailing Address 13061 Water Point Blvd 2012 05 23 City State Zip Code Transaction ID: C1668390 FL Windermere 34786-5818 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

				MBER	:	PAGE	5	7	OF	227	7
Use separate schedule(s) for each category of the	`	k only	or	ie)		_					
Detailed Summary Page	×	11a		11b		11c		12			
,,,,,,,, .		13		14		15		16	Г	17	,

		<u> </u>
	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Vicki Kay Friend Mailing Address 5753 Aloma Woods Blvd		Date of Receipt
City Oviedo FEC ID number of contributing	State Zip Code FL 32765-9437	05 23 2012 Transaction ID : C1668282 Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation	1000.00
FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Wayne S Friestad Mailing Address 1528 Langham Ter City	State Zip Code	Date of Receipt 05 23 2012
Lake Mary FEC ID number of contributing federal political committee.	FL 32746-1971	Transaction ID : C1668403 Amount of Each Receipt this Period 1000.00
Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General	Occupation Emergency Physician Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Douglas H Gaither Mailing Address 6140 S Gun Club Rd	1000.00	Date of Receipt
City Aurora FEC ID number of contributing federal political committee.	State Zip Code CO 80016-5308	Transaction ID : C1669761 Amount of Each Receipt this Period 100.00
Name of Employer Self Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		2100.00
	er only)	

FOR LINE NUMBER: PAGE 58 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) William Stephen Gallea Date of Receipt Mailing Address PO Box 6622 04 2012 City Zip Code State Transaction ID: C1642320 MT Helena 59604-6622 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation c/o Lopach & Carparelli **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Stephen Gallea Date of Receipt Mailing Address PO Box 6622 2012 05 22 City State Zip Code Transaction ID: C1667487 MT Helena 59604-6622 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation c/o Lopach & Carparelli **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. William Stephen Gallea Date of Receipt Mailing Address PO Box 6622 2012 06 15 City Zip Code State Transaction ID: C1772026 MT Helena 59604-6622 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation c/o Lopach & Carparelli **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LIN	_		:	PAGE	5	9 (OF	227
Use separate schedule(s) for each category of the	(check c		ne)						
Detailed Summary Page	X 11a	ı	11b		11c		12		
, ,	13		14		15		16		17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) Brett A Gamma Mailing Address 14930 Finegan Farm Dr City Germantown FEC ID number of contributing federal political committee. Name of Employer Shadyy Grove Adventist Hosp Receipt For: Primary General Other (specify)	State Zip Code MD 20874-3605 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M M M / D P / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brent F Gardner Mailing Address 640 E Club Cir City Longwood FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code FL 32779-2256 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brent F Gardner Mailing Address 640 E Club Cir City Longwood FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code FL 32779-2256 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	• • • • • • • • • • • • • • • • • • •	3250.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 60 OF 227

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Emergency Medicine Po	litical Action Committee	
Presbyterian Med Ctr ED	State Zip Code PA 19106-4111 C Decupation Emergency Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt M
Univ of Chicago Hosp	State Zip Code IL 60637-1275 C Decupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / 29 2012 Transaction ID: C1775412 Amount of Each Receipt this Period 250.00
St E E	State Zip Code OH 45209-1417 C C Cccupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / 21 2012 Transaction ID : C1647419 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only		715.00

	FOR LINE NUMBER:	PAGE	61 OF	227
Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 11b	11c	12	
,	13 14	15	16	17

17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ryan Geers Date of Receipt Mailing Address 4116 Paxton Woods Dr 2012 25 City Zip Code State Transaction ID: C1773358 OH Cincinnati 45209-1417 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation St E **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Steven Paul Gohsler Date of Receipt Mailing Address 6 Byram Ct 2012 06 26 City State Zip Code Transaction ID: C1774672 Mendham NJ 07945-2932 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Morristown Memorial Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. David Andrew Goldman Date of Receipt Mailing Address 428 Raccoon St 2012 05 23 City State Zip Code Transaction ID: C1668412 FL Lake Mary 32746-3802 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 62 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

227

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Christopher Michael Gooch Date of Receipt Mailing Address 105 Church St 2012 24 City Zip Code State Transaction ID: C1669367 OH Rayland 43943-9602 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Ohio Valley Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey Michael Goodloe Date of Receipt Mailing Address 3720 E 99th PI 2012 04 16 City State Zip Code Transaction ID: C1638567 OK Tulsa 74137-5231 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of Oklahoma **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Mylissa Amy Graber Date of Receipt Mailing Address 7809 Trieste Place 2012 04 17 City State Zip Code Transaction ID: C1642319 FL Delray Beach 33446-4403 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation **EMCARE Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 63	3 OF 227
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11c 1	2
, ,		6 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mylissa Amy Graber Date of Receipt Mailing Address 7809 Trieste Place 2012 22 City State Zip Code Transaction ID: C1667488 FL **Delray Beach** 33446-4403 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **EMCARE Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mylissa Amy Graber Date of Receipt Mailing Address 7809 Trieste Place 06 15 2012 City State Zip Code Transaction ID: C1772033 FL Delray Beach 33446-4403 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **EMCARE Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Louis G Graff Date of Receipt Mailing Address 130 Oakridge 2012 04 05 City Zip Code State Transaction ID: C1625955 CT Unionville 06085-1480 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation New Britian General Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	64 OF	227
Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 11b	11c	12	
,	13 14	15	16	17

17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ronald Eugene Graham Date of Receipt Mailing Address 2104 Pell St 07 2012 City Zip Code State Transaction ID: C1765963 Scottsboro AL 35769-3940 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Dr. Ronald Eugene Graham **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Keith Grams Date of Receipt Mailing Address 7 Tilsit Way 2012 06 09 City State Zip Code Transaction ID: C1767864 NY Webster 14580-4704 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Rochester General Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael A Granovsky Date of Receipt Mailing Address 8295 Alvord St 2012 05 15 City Zip Code State Transaction ID: C1663787 Mc Lean VA 22102-1739 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Greater Washington Emer Phys **Emergency Physician**

SUBTOTAL of Receipts This Page (optional)			,	Ξ	Ī	7	Ī	250	0.00	0	Ī
TOTAL This Period (last page this line number only)			,	_	_	7	_	_		_]

1000.00

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

	FOR LINE NUMBER:	PAGE 65 OF 227
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b	11c 12
Dotailed Carrillary 1 age	13 14	15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Stephen A D Grant Date of Receipt Mailing Address 1 Cherry Hills Dr 04 2012 City State Zip Code Transaction ID: C1642287 SC Aiken 29803-5688 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Aiken Emer Med Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen A D Grant Date of Receipt Mailing Address 1 Cherry Hills Dr 2012 05 22 City State Zip Code Transaction ID: C1667489 SC Aiken 29803-5688 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Aiken Emer Med Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen A D Grant Date of Receipt Mailing Address 1 Cherry Hills Dr 2012 06 15 City Zip Code State Transaction ID: C1772025 SC Aiken 29803-5688 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Aiken Emer Med Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 249.99

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 66 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Andrea L Green Date of Receipt Mailing Address 22428 Springflower Dr 04 04 2012 City State Zip Code Transaction ID: C1633283 CO Golden 80401-8033 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Dr. Andrea L Green **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Andrea L Green Date of Receipt Mailing Address 22428 Springflower Dr 17 2012 04 City State Zip Code Transaction ID: C1642326 CO Golden 80401-8033 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation Dr. Andrea L Green **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Andrea L Green Date of Receipt Mailing Address 22428 Springflower Dr 2012 05 22 City Zip Code State Transaction ID: C1667490 CO Golden 80401-8033 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Name of Employer Occupation Dr. Andrea L Green **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 67 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Andrea L Green Date of Receipt Mailing Address 22428 Springflower Dr 2012 City State Zip Code Transaction ID: C1772007 CO 80401-8033 Golden Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation Dr. Andrea L Green **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jason Greenbaum Date of Receipt Mailing Address 27 Sussex Pl 2012 04 16 City State Zip Code Transaction ID: C1642593 CT Stamford 06905-2931 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emer Med Phys Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert D Greenberg Date of Receipt Mailing Address 2401 S 31st St 2012 Scott & White 04 17 City State Zip Code Transaction ID: C1642332 TX Temple 76508-0001 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Scott & White Healthcare **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NOMBER:

(check only one)

X 11a 11b 11

FOR	PAGE	: (38	OF	-	227				
(check only one)										
×	11a		11b		11c		12			
	13		14		15		16	;		17

		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) Andrew L Griffin Mailing Address 8763 Tondella Way		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Fair Oaks FEC ID number of contributing federal political committee.	State Zip Code CA 95628-3925	Transaction ID : C1669357 Amount of Each Receipt this Period 1000.00
Name of Employer Mercy San Juan Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	_
Full Name (Last, First, Middle Initial) Wesley S Grigsby Mailing Address 601 N 30th St Creighton Univ Med Ctr En City Omaha FEC ID number of contributing federal political committee. Name of Employer Creighton Univ Med Ctr ED Receipt For: Primary General	mer Dept State Zip Code NE 68131-2137 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael Gary Guttenberg Mailing Address 11 Glen Hill Ln	1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tarrytown FEC ID number of contributing federal political committee. Name of Employer St Josephs Med Ctr Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code NY 10591-5055 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Transaction ID : C1642333 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional))	2250.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 69 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael Gary Guttenberg Date of Receipt Mailing Address 11 Glen Hill Ln 04 2012 City Zip Code State Transaction ID: C1666269 NY Tarrytown 10591-5055 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation St Josephs Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Alison Haddock Date of Receipt Mailing Address 1800 11th Ave 17 2012 04 City State Zip Code Transaction ID: C1642291 WA Seattle 98122-2421 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Univ of MI **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Alison Haddock Date of Receipt Mailing Address 1800 11th Ave 2012 05 22 City Zip Code State Transaction ID: C1667491 WA Seattle 98122-2421 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Univ of MI **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 266.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 70 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Alison Haddock Date of Receipt Mailing Address 1800 11th Ave 2012 City Zip Code State Transaction ID: C1772047 WA Seattle 98122-2421 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Univ of MI **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Kathryn Louise Hall-Boyer Date of Receipt Mailing Address 3537 E Orangeburg Ave 06 2012 27 City State Zip Code Transaction ID: C1774806 CA Modesto 95355-3671 Amount of Each Receipt this Period FEC ID number of contributing 91.40 federal political committee. Name of Employer Occupation Emory Univ Schl of Med **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 291.40 Other (specify) Full Name (Last, First, Middle Initial) c. Paul K Hanashiro Date of Receipt Mailing Address 2760 San Pasqual St 30 2012 05 City State Zip Code Transaction ID: C1670256 CA Pasadena 91107-5340 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Dr. Paul K Hanashiro **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1174.73 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR	R LINE	NU	MBER	:	PAGE	7	1	OF	22		
Use separate schedule(s)	(check only one)											
for each category of the Detailed Summary Page	×	11a		11b		11c		12				
		13		14		15		16		71		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Lindsay M Harmon Date of Receipt Mailing Address 6701 Shore Island Dr 04 2012 City State Zip Code Transaction ID: C1642318 IN Indianapolis 46220-1185 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Indiana Univ Sch of Med **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lindsay M Harmon Date of Receipt Mailing Address 6701 Shore Island Dr 05 2012 22 City State Zip Code Transaction ID: C1667492 IN Indianapolis 46220-1185 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Indiana Univ Sch of Med **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lindsay M Harmon Date of Receipt Mailing Address 6701 Shore Island Dr 2012 06 15 City Zip Code State Transaction ID: C1772049 IN Indianapolis 46220-1185 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Indiana Univ Sch of Med **Emergency Physician**

SUBTOTAL of Receipts This Page (optional)		7	Ī	Ī	7	I	30	0.00	
TOTAL This Period (last page this line number only)	_	7	_		7	_		·	

600.00

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

	FOF	R LINE	NU	IMBER	:	PAGE		72 OF		227		
Use separate schedule(s)	(check only one)											
for each category of the Detailed Summary Page	×	11a		11b		11c		12				
,		13		14		15		16		17		

		<u> </u>
	Statements may not be sold or used by any pers name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) William G Heegaard Mailing Address 701 Park Ave Hennepin County Med Ctr El City Minneapolis FEC ID number of contributing federal political committee. Name of Employer HCMC Receipt For: Primary General Other (specify)	State Zip Code MN 55415-1623 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 05 01 2012 Transaction ID: C1649018 Amount of Each Receipt this Period 400.00
Full Name (Last, First, Middle Initial) Jonathan Heidt Mailing Address 660 S Euclid Ave Barnes Jewish Hosp City Saint Louis FEC ID number of contributing federal political committee. Name of Employer Barnes Jewish Hosp Receipt For: Primary General Other (specify)	State Zip Code MO 63110-1010 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.02	Date of Receipt 04 17 2012 Transaction ID: C1642269 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Jonathan Heidt Mailing Address 660 S Euclid Ave Barnes Jewish Hosp City Saint Louis FEC ID number of contributing federal political committee. Name of Employer Barnes Jewish Hosp Receipt For: Primary General Other (specify)	State Zip Code MO 63110-1010 C Occupation Emergency Physician Aggregate Year-to-Date 250.02	Date of Receipt 05 22 2012 Transaction ID : C1667493 Amount of Each Receipt this Period 41.67
SUBTOTAL of Receipts This Page (optional)	>	483.34
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 73 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jonathan Heidt Date of Receipt Mailing Address 660 S Euclid Ave Barnes Jewish Hosp 2012 City Zip Code State Transaction ID: C1772048 MO Saint Louis 63110-1010 Amount of Each Receipt this Period FEC ID number of contributing C 41.67 federal political committee. Name of Employer Occupation Barnes Jewish Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Carlton E Heine Date of Receipt Mailing Address 2986 Foster Ave 2012 05 22 City State Zip Code Transaction ID: C1667422 ΑK Juneau 99801-1956 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Skagit Valley Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Marilyn Joan Heine Date of Receipt Mailing Address 900 Twining Rd 2012 05 22 City State Zip Code Transaction ID: C1667428 PΑ Dresher 19025-1726 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Mercy Suburban Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1291.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	74 OF	227
Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	16	17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Josh Heller Mailing Address 26 Cherry Lane Dr		Date of Receipt 06 14 2012
City Englewood FEC ID number of contributing federal political committee.	State Zip Code CO 80113	Transaction ID : C1768814 Amount of Each Receipt this Period 250.00
Name of Employer CarePoint Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Marcus A Hendry Mailing Address 6827 Windemere Dr City	State Zip Code	Date of Receipt 05 01 2012
Zionsville FEC ID number of contributing federal political committee.	IN 46077-8552	Transaction ID : C1651318 Amount of Each Receipt this Period 1000.00
Name of Employer SVEP Inc Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Charles W Henrichs III Mailing Address 800 N Justice St Margaret R Pardee Meml Ho City Hendersonvile FEC ID number of contributing federal political committee. Name of Employer Hendersonville Emer Consultant	State Zip Code NC 28791-3410 C Occupation Emergency Physician	Date of Receipt 05 22 2012 Transaction ID : C1667441 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	>	1500.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 75 OF 227

TEMIZED DECEIDTS		Use separate schedule(s)	(check only one)								
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1			11b	\vdash	11c 15	12 16	Г	17
Any information copied from such Reports and St or for commercial purposes, other than using the			erson for	the p		oose o	of soli	iciting	contrib		ıs
NAME OF COMMITTEE (In Full)		· · ·									
National Emergency Medicine P	olitical Ac	tion Committee									
Full Name (Last, First, Middle Initial) Dennis A Hernandez			Dat	e of	Re	ceipt					
Mailing Address 3278 Tala Loop				м 05	/	23		Y	2012	- Y	
City	State	Zip Code	Tr	ansa	acti	ion ID	: C16	6839	7		
Longwood	FL	32779-3128	Am	ount	of	Each	Rece	ipt thi	s Period	d	
FEC ID number of contributing federal political committee.	С					,		7	100	0.00	
Name of Employer	Occupation										
FL Emer Phys Kang & Assoc	Emergency P	Physician									
Receipt For:	Aggregate Y	ear-to-Date ▼									
Primary General		1000.00									
Other (specify) ▼		1000.00									
Full Name (Last, First, Middle Initial)											
Larry Allen Hobbs			Dat	e of	Re	ceipt					
Mailing Address 12717 Brewster Dr Lee Memorial Gulf Coast Med	Ctr			■ M 04	/	17	D / 7	Y	2012	Y	
City	State	Zip Code			acti	on ID		4226			
Fort Myers	FL	33908-1809	Am	ount	of	Each	Rece	ipt thi	s Period	d	
FEC ID number of contributing federal political committee.	С					,	Ξ	7	83	3.33	
Name of Employer	Occupation										
Southwest FL Emer Phys	Emergency P	hysician									
Receipt For:	Aggregate Y	ear-to-Date ▼									
Primary General Other (specify) ▼		583.35									
Full Name (Last, First, Middle Initial) C. Larry Allen Hobbs			Dat	e of	Re	ceipt					
Mailing Address 12717 Brewster Dr			M	= M	/	D =	_	Y	Y	- Y	1
Lee Memorial Gulf Coast Med		7in Code		05	l,	22			2012	-	
City Fort Myers	State FL	Zip Code 33908-1809				ion ID Each			5 s Period		
FEC ID number of contributing federal political committee.	С					,		1		3.37	
Name of Employer	Occupation										
Southwest FL Emer Phys	Emergency F	Physician									
Receipt For:	Aggregate Y	ear-to-Date ▼									
Primary General		E02.2E									
Other (specify) ▼		583.35									
SUBTOTAL of Receipts This Page (optional)						,		7	1166	6.70	
TOTAL This Period (last page this line number of	only)					, ,		7			

FOR LINE NUMBER: PAGE 76 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Larry Allen Hobbs Date of Receipt Mailing Address 12717 Brewster Dr Lee Memorial Gulf Coast Med Ctr 2012 City Zip Code State Transaction ID: C1668417 FL Fort Myers 33908-1809 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Southwest FL Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 583.35 Other (specify) Full Name (Last, First, Middle Initial) B. Larry Allen Hobbs Date of Receipt Mailing Address 12717 Brewster Dr Lee Memorial Gulf Coast Med Ctr 2012 06 15 City Zip Code State Transaction ID: C1772052 FL Fort Myers 33908-1809 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Southwest FL Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 583.35 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy Hodge Date of Receipt Mailing Address 3105 Dobie Rd 2012 05 17 City State Zip Code Transaction ID: C1666765 MI Mason 48854-9422 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Emer Med Assoc MI **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 366.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PA	GE	77	OF	227
Use separate schedule(s) for each category of the	(check only one)			_		
Detailed Summary Page	X 11a 11b	11c		12		
, 0	13 14	15		16	; [17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) Timothy Hodge Mailing Address 3105 Dobie Rd		Date of Receipt
City Mason FEC ID number of contributing federal political committee. Name of Employer Emer Med Assoc MI Receipt For:	State Zip Code MI 48854-9422 C Occupation Emergency Physician Aggregate Year-to-Date ▼	7 Transaction ID : C1669358 Amount of Each Receipt this Period 125.00
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) Timothy Hodge Mailing Address 3105 Dobie Rd City Mason	State Zip Code MI 48854-9422	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Emer Med Assoc MI Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 450.00	125.00
Full Name (Last, First, Middle Initial) C. Kenneth L Holbert Mailing Address 130 Laural Hill Dr City Smyrna FEC ID number of contributing federal political committee.	State Zip Code TN 37167-4907	Date of Receipt 05 30 2012 Transaction ID : C1673228 Amount of Each Receipt this Period
Name of Employer Harton Reg Med Ctr Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	
SUBTOTAL of Receipts This Page (optional)	•	450.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 78 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Stephen G Holtzclaw Date of Receipt Mailing Address 10265 SW 23rd Ct 2012 25 City State Zip Code Transaction ID: C1673209 FL Davie 33324-7619 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation TeamHealth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen G Holtzclaw Date of Receipt Mailing Address 10265 SW 23rd Ct 2012 06 11 City State Zip Code Transaction ID: C1765979 FL Davie 33324-7619 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation TeamHealth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sandra W Horning Date of Receipt Mailing Address 7611 S Mountain Springs Rd 30 2012 05 City Zip Code State Transaction ID: C1670257 WA Spokane 99223-1880 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation SHMC ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LI	INE NU	IMBER	:	PAGE	. /	79	OF
Use separate schedule(s)	(check	only or	ne)					
for each category of the Detailed Summary Page	X 11	а	11b		11c		12	
	12	3	14		15		16	

227

Any information copied from such Popular	orts and Statements may not be sold or used by any per	rson for the nurnose of soliciting contributions			
	using the name and address of any political committee				
NAME OF COMMITTEE (In Full)					
$ \; angle$ National Emergency Med	dicine Political Action Committee				
Full Name (Last, First, Middle Initial	N				
A. Hans Roberts House)	Date of Receipt			
Mailing Address 200 Hawkins Dr		M M / D D / Y Y Y Y			
Univ of IA Hosps &	Clncs	04 17 2012			
City	State Zip Code	Transaction ID : C1642334			
Iowa City	IA 52242-1009	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation				
Univ of IA Hosps & Clncs	Emergency Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General	700.00				
Other (specify) ▼	700.00				
Full Name (Last, First, Middle Initial B. Hans Roberts House)	Bata of Bassist			
		Date of Receipt			
Mailing Address 200 Hawkins Dr Univ of IA Hosps &	Clace	05 22 2012			
City	State Zip Code	Transaction ID : C1667442			
Iowa City	Amount of Each Receipt this Period				
FEC ID number of contributing	FEC ID number of contributing				
federal political committee.	C	100.00			
Name of Employer	Occupation				
Univ of IA Hosps & Clncs	Emergency Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General	700.00				
Other (specify) ▼	700.00				
Full Name (Last, First, Middle Initial)	2. (2			
C. Hans Roberts House		Date of Receipt			
Mailing Address 200 Hawkins Dr Univ of IA Hosps &	Clace	06 15 2012			
City	State Zip Code	Transaction ID : C1772057			
Iowa City	IA 52242-1009	Amount of Each Receipt this Period			
FEC ID number of contributing		100.00			
federal political committee.	C	100.00			
Name of Employer	Occupation				
Univ of IA Hosps & Clncs					
Receipt For:	Emergency Physician Aggregate Year-to-Date ▼				
Primary General					
Other (specify) ▼	700.00				
	1	tro co			
SUBTOTAL of Receipts This Page (o	ptional)	450.00			
TOTAL This Period (last page this line					
I IVIAL THIS PERIOD HAST DAME THIS line	e number only)				

FOR LINE NUMBER: PAGE 80 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Marc P Hyde Date of Receipt Mailing Address 2637 E Spring Hollow Dr 04 2012 City State Zip Code Transaction ID: C1642731 UT Salt Lake Cty 84109-4036 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation St Marks Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Peter J Jacoby Date of Receipt Mailing Address 167 Sprain Brook Rd 2012 05 23 City State Zip Code Transaction ID: C1668415 CT Woodbury 06798-1914 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation St Marys Hosp ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. William Paul Jaquis Date of Receipt Mailing Address 1216 S Bouldin St 2012 05 17 City Zip Code State Transaction ID: C1664363 MD **Baltimore** 21224-5000 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Sinai Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 81 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) William Paul Jaquis Date of Receipt Mailing Address 1216 S Bouldin St 01 2012 City Zip Code State Transaction ID: C1757333 MD **Baltimore** 21224-5000 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Sinai Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Peter John Date of Receipt Mailing Address 20 Hartley St 2012 04 17 City State Zip Code Transaction ID: C1642335 North Haven CT 06473-4409 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Caritas Carney Hosp Dept of EM **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Melissa Divan Johnson Date of Receipt Mailing Address 725 NW 10th Ave 2012 05 29 City Zip Code State Transaction ID: C1669750 OR Portland 97209-3241 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Oregon Hlth & Sci Univ **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 525.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 82 OF 227

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	y one) 11b 14	11c	12 16	17	
Any information copied from such Reports and or for commercial purposes, other than using the					soliciting		ons
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political A	ction Committee					
Full Name (Last, First, Middle Initial) Jason Paul Jones Mailing Address 2897 Carmelo Dr City Henderson FEC ID number of contributing federal political committee. Name of Employer Univ of KY Chandler Med Ctr Receipt For: Primary General Other (specify) Other (specify)	State NV C Occupation Emergency Aggregate		05 Trans	Receipt / 24 action ID: 0			Y 00
Full Name (Last, First, Middle Initial) Jeffrey Alan Joseph Mailing Address 14855 Tyler Mill Ct City Haymarket FEC ID number of contributing federal political committee. Name of Employer	State VA C	Zip Code 20169-2628	04 Trans	Receipt 17 action ID: (00
Dr. Jeffrey Alan Joseph Receipt For: Primary General Other (specify) ▼	Emergency						
Full Name (Last, First, Middle Initial) Jeffrey Alan Joseph Mailing Address 14855 Tyler Mill Ct City Haymarket FEC ID number of contributing federal political committee. Name of Employer Dr. Jeffrey Alan Joseph Receipt For: Primary General Other (specify)	State VA C Occupation Emergency Aggregate		05 Trans	Receipt / 22 action ID:	C166749		00
SUBTOTAL of Receipts This Page (optional)		7 7	ļ.	7	7	450.0	00
TOTAL This Period (last page this line number	er only)	>			,		

		AGE 83 OF 227
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11	c12
, ,		16 17

	Detailed Suffillary Fage	13 14 15 16 17
	Statements may not be sold or used by any personal parameter and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Jeffrey Alan Joseph		Date of Receipt
Mailing Address 14855 Tyler Mill Ct		06 15 2012
City	State Zip Code	Transaction ID: C1772050
Haymarket	VA 20169-2628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Dr. Jeffrey Alan Joseph	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	400.00	
Other (specify)	400.00	
Full Name (Last, First, Middle Initial) 3. Neal A Kaforey		Date of Receipt
Mailing Address 3413 E Glencoe Rd		06 20 2012
City	State Zip Code	Transaction ID : C1772424
Richfield	OH 44286-9341	Amount of Each Receipt this Period
FEC ID number of contributing		500.00
federal political committee.	C	500.00
Name of Employer	Occupation	
OPMG	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Citici (apocity)	33333	
Full Name (Last, First, Middle Initial) Costas Andreas Kaiafas		Date of Receipt
Mailing Address 910 Country Club Rd		04 22 2012
City	State Zip Code NJ 08807-1174	Transaction ID : C1647379
Bridgewater	140 0007-1174	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Emergency Medical Associates	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	
Other (specify)	1000.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1600.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 84 OF 227 Use separate schedule(s) for each category of the Detailed Summary Page

10	LIINL	IVO	חשטואוי	ITAGE	 7	Oi	-	
(ch	eck only	or or	ne)					
>	1 1a		11b	11c	12			
	13		14	15	16	;		17

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Steven B Kailes Mailing Address 1998 Rivergate Dr City Fleming Isle FEC ID number of contributing federal political committee.	State Zip Code FL 32003-8686	Date of Receipt 04 17 2012 Transaction ID : C1642322 Amount of Each Receipt this Period 100.00
Name of Employer Southeast Emer Consultant Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) 3. Steven B Kailes Mailing Address 1998 Rivergate Dr		Date of Receipt 05 22 2012
City Fleming Isle FEC ID number of contributing federal political committee.	State Zip Code FL 32003-8686	Transaction ID : C1667497 Amount of Each Receipt this Period 100.00
Name of Employer Southeast Emer Consultant Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Steven B Kailes Mailing Address 1998 Rivergate Dr City	State Zip Code	Date of Receipt 06 15 2012 Transaction ID : C1772037
Fleming Isle FEC ID number of contributing federal political committee. Name of Employer Southeast Emer Consultant Receipt For: Primary General Other (specify)	FL 32003-8686 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	only)	7

FOR LINE NUMBER: PAGE 85 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Neeraja Kairam Date of Receipt Mailing Address 20 Club Dr 04 30 2012 City State Zip Code Transaction ID: C1649330 07901-3138 Summit NJ Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rodney C Kang Date of Receipt Mailing Address 2420 Sand Lake Rd 05 2012 23 City State Zip Code Transaction ID: C1668382 FL Longwood 32779-5811 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gary R Katz Date of Receipt Mailing Address 7918 Wisteria Ct 2012 06 24 City State Zip Code Transaction ID: C1774690 OH Dublin 43016-8531 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation OSU, ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LI	NE NU	MBER:	:	PAGE	: 8	36 C)F
Use separate schedule(s)	(check	only or	ne)					
for each category of the Detailed Summary Page	` 	a 🗍	11b		11c		12	
zotanou oummary r ago	13		14		15		16	[

227

		13 14 15 16 17
	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) A. Steven A Katz		Date of Receipt
Mailing Address 1002 Stratford Ave		06 26 2012
City	State Zip Code	Transaction ID : C1774478
Elkins Park	PA 19027-3025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
EmCare	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. George E Kennedy	·	Date of Receipt
Mailing Address 1605 Lafayette Dr NE		M = M / D = D / Y = Y = Y
City	State Zip Code	05 29 2012 Transportion ID : C1660635
Albuquerque	NM 87106-1160	Transaction ID : C1669635 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
University of New Mexico	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. Michael J Keyes Jr.	•	Date of Receipt
Mailing Address 216 Canterbury Rd		06 26 2012
City	State Zip Code	Transaction ID : C1774481
Rochester	NY 14607-3434	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Rochester General	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line numb	per only)	7 7 7

FOR LINE NUMBER: PAGE 87 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Derik K King Date of Receipt Mailing Address 6 Clermont Ln 04 2012 City Zip Code State Transaction ID: C1632783 MO Saint Louis 63124-1304 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **Emerg Consultants Inc Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) Full Name (Last, First, Middle Initial) B. Derik K King Date of Receipt Mailing Address 6 Clermont Ln 06 2012 26 City State Zip Code Transaction ID: C1774693 MO Saint Louis 63124-1304 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation **Emerg Consultants Inc Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) Full Name (Last, First, Middle Initial) c. Paul Daniel Kivela Date of Receipt Mailing Address 1370 Trancas St 2012 05 24 City State Zip Code Transaction ID: C1669361 CA Napa 94558-2912 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Napa Valley Emer Med Grp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 760.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

		R LINE			PAGE	: 8	38	OF	:	227	
Use separate schedule(s) for each category of the	`	ck only	or	ne)							
Detailed Summary Page	<u> </u> ×	11a		11b		11c		12			
, ,		13		14		15		16			17

	Statements may not be sold or used by any personant and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) David N Klein Mailing Address 43440 Miles Control of the Control of t		Date of Receipt
Mailing Address 12410 Milestone Center Dr		M M / D D / Y Y Y Y
Med Emer Prof Llc City	State Zip Code	05 07 2012 Transaction ID : C1655018
Germantown	MD 20876-7103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	
MEP	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) 3. Keith E Kocher		Date of Receipt
Mailing Address 2918 Baylis Dr		M = M / D = D / Y = Y = Y
City	State Zip Code	04 17 2012 Transaction ID : C1642210
Ann Arbor	MI 48108-1708	Amount of Each Receipt this Period
FEC ID number of contributing		7 thouse of Each Hoodipt this Follow
federal political committee.	C	200.00
Name of Employer	Occupation	
Foote Hosp	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) C. Keith E Kocher		Date of Receipt
Mailing Address 2918 Baylis Dr		05 14 _ 2012 _
City	State Zip Code	Transaction ID : C1666294
Ann Arbor	MI 48108-1708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Foote Hosp	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		2300.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 89 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mickey M Kolodny Date of Receipt Mailing Address 1601 N Sepulveda Blvd # 362 04 2012 City State Zip Code Transaction ID: C1642211 CA Manhattan Bch 90266-5111 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Daniel Freeman Marina Hosp ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Terry Kowalenko Date of Receipt Mailing Address 4619 Oak Pointe Dr 2012 04 17 City State Zip Code Transaction ID: C1642295 MI **Brighton** 48116-7728 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Univ of MI - Taubman Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Terry Kowalenko Date of Receipt Mailing Address 4619 Oak Pointe Dr 2012 05 22 City State Zip Code Transaction ID: C1667498 MI **Brighton** 48116-7728 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Univ of MI - Taubman Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 466.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 90 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Terry Kowalenko Date of Receipt Mailing Address 4619 Oak Pointe Dr 2012 City State Zip Code Transaction ID: C1772019 Brighton MI 48116-7728 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Univ of MI - Taubman Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Paul Andrew Kozak Date of Receipt Mailing Address 21925 N Calle Royale 04 18 2012 City State Zip Code Transaction ID: C1642715 Scottsdale ΑZ 85255-5000 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Mayo Clinic Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Christopher L Krieg Date of Receipt Mailing Address 5500 Rock Valley Way 2012 04 17 City State Zip Code Transaction ID: C1642215 KY Louisville 40241-1466 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Norton Suburban Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1583.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 91 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mark S Kruger Date of Receipt Mailing Address PO Box 1209 2012 23 City Zip Code State Transaction ID: C1668336 FL Sanford 32772-1209 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Owen Lander Date of Receipt Mailing Address 131 Seneca Hills Ests 20 2012 04 City State Zip Code Transaction ID: C1644895 WV Morgantown 26508-9490 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation WV Univ Hosps **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Beth Ellen Lapka Date of Receipt Mailing Address 4600 S Deerfield Cir 2012 04 06 City Zip Code State Transaction ID: C1625988 SD Sioux Falls 57105-7057 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. Name of Employer Occupation Sioux Valley Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 1650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 92 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Linda L Lawrence Date of Receipt Mailing Address PSC 103 Box 3521 06 2012 City State Zip Code Transaction ID: C1654575 ΑE APO 09603-0036 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation USAF **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Guy David Leveaux Date of Receipt Mailing Address RR 2 Box 297 2012 05 01 City State Zip Code Transaction ID: C1666299 WV Shinnston 26431-9613 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Braxton Cty Mem Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Guy David Leveaux Date of Receipt Mailing Address RR 2 Box 297 2012 06 11 City Zip Code State Transaction ID: C1765970 WV Shinnston 26431-9613 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Braxton Cty Mem Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 93 OF 227 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) Alan J Lewis Mailing Address 22943 Ostronic Dr City Woodland HIs FEC ID number of contributing federal political committee. Name of Employer Long Beach Mem Med Ctr Receipt For: Primary General Other (specify)	State Zip Code CA 91367-6141 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 04 06 2012 Transaction ID: C1625985 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Christopher C Lingan Mailing Address 1716 Acacia Bud Dr City Austin FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code TX 78733-5737 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Jorge Lopez-Ferrer Mailing Address 1476 Chippewa Ln City Geneva FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code FL 32732-9183 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	·	2250.00

FOR LINE NUMBER: PAGE 94 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ralph K Losey Date of Receipt Mailing Address 207 S Prospect St 2012 25 City State Zip Code Transaction ID: C1773500 Galena IL 61036-2119 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Univ of IL at Chicago ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Seth A Lotterman Date of Receipt Mailing Address 7 Willow Ln 20 2012 06 City State Zip Code Transaction ID: C1772810 West Hartford CT 06107-1149 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Hartford Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Donald L Lum Date of Receipt Mailing Address 2000 North Ave 2012 04 26 Northfield Hosp City Zip Code State Transaction ID: C1646062 MN Northfield 55057-1498 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Northfield Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	Ξ	Ξ				00.00	
TOTAL This Period (last page this line number only)		_				×.	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 95 OF 227

TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check	only			F	11c	12		717
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	ay not be sold or used by any pe	erson for	the p	purp	ose o	of so	oliciting	contrib	outior	าร
NAME OF COMMITTEE (In Full) National Emergency Medicine F			10 301101	CON	IIIID	utions	110	111 3001	II COIIIII	iii.iee.	•
Full Name (Last, First, Middle Initial) Thomas J Lydon Mailing Address PO Box 51 City Rye Beach FEC ID number of contributing federal political committee. Name of Employer Wentworth Douglass Hosp Receipt For: Primary General Other (specify)	State NH C Occupation Emergency Aggregate		T	04 ransa	/ acti		8 : C	178786	nis Perio	_	
Full Name (Last, First, Middle Initial) John L Lyman Mailing Address 332 Congress Park Dr Premier Hlth Care City Dayton FEC ID number of contributing federal political committee. Name of Employer Premier Hlth Care Receipt For: Primary General Other (specify)	State OH C Occupation Emergency Aggregate		T ₁	06 ansa	actio	1 on ID	: C	177200 ceipt th	nis Perio	_	
Full Name (Last, First, Middle Initial) Catherine Anna Marco Mailing Address 7129 Jamesford Dr City Toledo FEC ID number of contributing federal political committee. Name of Employer Univ of Toledo Med Ctr Receipt For: Primary General Other (specify)	State OH C Occupation Emergency Aggregate		T	04 rans	/ acti	1 ion ID	: C	163278 ceipt th	nis Perio	-	
SUBTOTAL of Receipts This Page (optional)		<u>, </u>	F	-	-	7	=	7	160	00.00	=
TOTAL This Period (last page this line number	only)	·····	. L			7		- 1		ж.	

	FOR LINE	NUMBER:	PAGE	= 96 OF	
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	Γ

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Abigail M Martinez Mailing Address 1478 S Prairie Ave		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago FEC ID number of contributing federal political committee.	State Zip Code IL 60605-3345	Transaction ID : C1773874 Amount of Each Receipt this Period 1000.00
Name of Employer EMP Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Angela F Mattke Mailing Address 1080 Pebblebrook Rd SE City	State Zip Code	Date of Receipt 04 17 2012
Mableton FEC ID number of contributing federal political committee.	GA 30126-5612	Transaction ID : C1642316 Amount of Each Receipt this Period 100.00
Name of Employer EmergiNet/Summit Med Svcs Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Angela F Mattke Mailing Address 1080 Pebblebrook Rd SE		Date of Receipt 05 22 2012
City Mableton FEC ID number of contributing federal political committee. Name of Employer EmergiNet/Summit Med Svcs Receipt For: Primary General Other (specify) ▼	State Zip Code GA 30126-5612 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 700.00	Transaction ID : C1667499 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	>	1200.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 97 OF (check only one) X 11a 11b 12 11c

227 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Angela F Mattke Date of Receipt Mailing Address 1080 Pebblebrook Rd SE 2012 City Zip Code State Transaction ID: C1772036 GΑ 30126-5612 Mableton Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation EmergiNet/Summit Med Svcs **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Eric E Maur Date of Receipt Mailing Address 6209 Dwayne Starnes Dr 17 2012 04 City State Zip Code Transaction ID: C1642300 NC Hickory 28602-8959 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Attn 20-05 **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Eric E Maur Date of Receipt Mailing Address 6209 Dwayne Starnes Dr 2012 05 22 City State Zip Code Transaction ID: C1667500 NC Hickory 28602-8959 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Attn 20-05 **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 266.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 98 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Eric E Maur Date of Receipt Mailing Address 6209 Dwayne Starnes Dr 2012 City Zip Code State Transaction ID: C1772044 NC 28602-8959 Hickory Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Attn 20-05 **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Thom A Mayer Date of Receipt Mailing Address 10306 Eaton PI BestPractices Inc 2012 05 07 City State Zip Code Transaction ID: C1655031 VA Fairfax 22030-2224 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation BestPractices Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Oliver Mayorga Date of Receipt Mailing Address 32 Church St 2012 06 19 City State Zip Code Transaction ID: C1772212 CT Mystic 06355-2739 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Keesler Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2083.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 99 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) C L McArthur Date of Receipt Mailing Address 11 Cardiff 04 2012 City Zip Code State Transaction ID: C1642336 CA Laguna Niguel 92677-2936 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Desert Regl Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 591.40 Other (specify) Full Name (Last, First, Middle Initial) B. C L McArthur Date of Receipt Mailing Address 11 Cardiff 2012 06 27 City State Zip Code Transaction ID: C1774513 CA Laguna Niguel 92677-2936 Amount of Each Receipt this Period FEC ID number of contributing 91.40 federal political committee. Name of Employer Occupation Desert Regl Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 591.40 Other (specify) Full Name (Last, First, Middle Initial) c. Edward McCutcheon Date of Receipt Mailing Address 4112 Bannockburn Pl 2012 05 24 City Zip Code State Transaction ID: C1669383 NC Charlotte 28211-4521 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation **PEMA Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1341.40 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 100 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Matthew John McDevitt Date of Receipt Mailing Address 800 S Gaylord St 04 2012 27 City Zip Code State Transaction ID: C1649213 CO 80209-4632 Denver Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Carepoint PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Jonathon McGarry Date of Receipt Mailing Address 102 E Lake Mead Pkwy St Rose Dominican Hosp 2012 05 29 City State Zip Code Transaction ID: C1669749 NV Henderson 89015-5575 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation St Rose Dominican Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dennis Lucas McGill Date of Receipt Mailing Address 19 Camden Rd 2012 04 17 City Zip Code State Transaction ID: C1642302 NJ Hillsborough 08844-3842 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation **Emer Med Assoc Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 433.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	MBER	PAGE	: 1	01	OF	2	227	
Use separate schedule(s) for each category of the	l `—	ck only	or	1				1			
Detailed Summary Page	<u> </u> ×	11a		11b		11c		12	_		11
		13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Dennis Lucas McGill Date of Receipt Mailing Address 19 Camden Rd 2012 22 City State Zip Code Transaction ID: C1667501 Hillsborough NJ 08844-3842 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Emer Med Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Dennis Lucas McGill Date of Receipt Mailing Address 19 Camden Rd 06 2012 15 City State Zip Code Transaction ID: C1772023 Hillsborough NJ 08844-3842 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emer Med Assoc Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Randi James McLeod Date of Receipt Mailing Address 1 Hospital Dr 2012 05 07 **Evangelical Cmnty Hosp** City Zip Code State Transaction ID: C1655032 PΑ Lewisburg 17837-9350 Amount of Each Receipt this Period

	,										
		T	-	-	Ŧ	-		-	-	440.6	0
SUBTOTAL of Receipts This Page (optional)		L	_	_	7	_		7	_	416.6	06
		- [
TOTAL This Period (last page this line number	only)		-	_	7	-	-	7	-	1(0)	

250.00

С

Occupation

Emergency Physician

Aggregate Year-to-Date ▼

250.00

FEC ID number of contributing

General

federal political committee.

Evangelical Cmnty Hosp

Other (specify)

Name of Employer

Primary

Receipt For:

	FOR LINE NUMBER:	PAGE	102 OF	227
Use separate schedule(s) for each category of the	(check only one)	_	_	
Detailed Summary Page	X 11a 11b	11c	12	
,	13 14	15	16	17

		13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) A. Richard S McMonigal	Date of Receipt	
Mailing Address 3610 45th St NE		06 19 2012
City Tacoma	State Zip Code WA 98422-2293	Transaction ID : C1772145 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Auburn General Hosp	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Steven D Mehaffey	'	Date of Receipt
Mailing Address 23749 Fletcher Isle		05 14 2012
City	State Zip Code	Transaction ID : C1666133
Ponchatoula	LA 70454-6833	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Total Wound Treatment Ctr	Occupation	
Receipt For:	Emergency Physician	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) C. Steven D Mehaffey	•	Date of Receipt
Mailing Address 23749 Fletcher Isle		05 15 2012
City	State Zip Code	Transaction ID: C1663765
Ponchatoula	LA 70454-6833	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
Total Wound Treatment Ctr	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	900.00
TOTAL This Poriod (lost nose this line areas	poer only)	
TOTAL THIS FERIOD (last page this line numb	per only)	

	FOR LI	NE NU	JMBER:	:	PAGE	1	03 OF	
Use separate schedule(s)	(check	only or	ne)					Т
for each category of the Detailed Summary Page	X 11	a	11b		11c		12	
zotanou cummary r ago	13		14		15		16	Г

227

		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) Lawrence A Melniker Mailing Address 506 6th St New York Meth Hosp City Brooklyn FEC ID number of contributing federal political committee. Name of Employer NY Methodist Hosp Emer Phys Receipt For: Primary General Other (specify)	State Zip Code NY 11215-3609 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y O4
Full Name (Last, First, Middle Initial) David James Mendelson Mailing Address 4633 Post Oak Dr City Frisco FEC ID number of contributing federal political committee. Name of Employer EmCare Inc Receipt For: Primary General Other (specify)	State Zip Code TX 75034-5130 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jacob Mark Meredith III Mailing Address 1231A Route 532 City Chatsworth FEC ID number of contributing federal political committee. Name of Employer Jersey Emer Med Spec Receipt For: Primary General Other (specify)	State Zip Code NJ 08019-9711 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	583.33
TOTAL This Period (last page this line numl	per only)	

FOR LINE NUMBER: PAGE 104 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jacob Mark Meredith III Date of Receipt Mailing Address 1231A Route 532 2012 29 City Zip Code State Transaction ID: C1669751 Chatsworth NJ 08019-9711 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Jersey Emer Med Spec **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Jacob Mark Meredith III Date of Receipt Mailing Address 1231A Route 532 06 15 2012 City State Zip Code Transaction ID: C1772009 NJ Chatsworth 08019-9711 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Jersey Emer Med Spec **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Anthony Joseph Midkiff Date of Receipt Mailing Address 1773 Hidden Oak Trl 2012 05 01 City Zip Code State Transaction ID: C1651309 OH Mansfield 44906-3560 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Mansfield Med Ctr ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 416.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:				PAGE	1	05 OF	=	227	
Use separate schedule(s) for each category of the	(check	only	on	ie)						
Detailed Summary Page	X 1	1a		11b		11c		12		
,	1	3		14		15		16		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Erik Charles Miller Mailing Address 1744 Leisure Ln City Yakima FEC ID number of contributing federal political committee. Name of Employer Yakima Mem Hosp Receipt For: Primary General Other (specify)	State Zip Code WA 98908-9224 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 05 22 2012 Transaction ID: C1667503 Amount of Each Receipt this Period 125.00
Full Name (Last, First, Middle Initial) Stephan Miller Mailing Address 3809 Ponderosa Ct City Rapid City FEC ID number of contributing federal political committee. Name of Employer Rapid City Emergency Services Receipt For: Primary General Other (specify)	State Zip Code SD 57702 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 26 2012 Transaction ID : C1774111 Amount of Each Receipt this Period 250.00
Eull Name (Last, First, Middle Initial) David Scott Miner Mailing Address 2398 S Garfield St City Denver FEC ID number of contributing federal political committee. Name of Employer Dr. D Scott Miner Receipt For: Primary General Other (specify) ▼	State Zip Code CO 80210-5615 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 04 25 2012 Transaction ID : C1649263 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	•	475.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 106 OF Use separate schedule(s) (check only one) X 11a 11b 11c

227 for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full)

$ \rangle$	National Emergency Medicine	Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Daniel C Minior	Date of Receipt	
	Mailing Address 3406 Belle Meade Dr NW		05 07 _ 2012 _
	City	State Zip Code	Transaction ID : C1655029
	Wilson	NC 27896-8676	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer	Occupation	
	Nash Gen Hosp	Emergency Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Thomas R Mitchell		Date of Receipt
	Mailing Address 3370 Sweeney Hollow Rd	M = M / D = D / Y = Y = Y	
	3070 Gweeney Hollow Na		04 19 2012
	City	State Zip Code	Transaction ID : C1644891
	Franklin	TN 37064-9575	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	200.00
	Name of Employer	Occupation	
	Dr. Thomas R Mitchell	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	riggi egano i ean to a me y	
	Other (specify) ▼	1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Thomas R Mitchell		Date of Receipt
	Mailing Address 3370 Sweeney Hollow Rd		M = M / D = D / Y = Y = Y
	5 3 3 3 3 5 6 6 6 CWCCHOY Flollow Rd		05 23 _ 2012 _
	City	State Zip Code	Transaction ID : C1668414
	Franklin	TN 37064-9575	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	200.00
	Name of Employer	Occupation	
	Dr. Thomas R Mitchell	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	riggiogato Total to Bato V	
	Other (specify) ▼	1000.00	
s	SUBTOTAL of Receipts This Page (optional)	>	650.00
Т	'OTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 107 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) James C Mitchiner Date of Receipt Mailing Address 1265 Barrister Rd 04 2012 City Zip Code State Transaction ID: C1644886 48105-2821 Ann Arbor MI Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation EPMG. PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin Monfette Date of Receipt Mailing Address 2954 Island Point Dr 2012 05 22 City State Zip Code Transaction ID: C1667439 MI Metamora 48455-9625 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation St Joseph Mercy Oakland Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joshua B Moskovitz Date of Receipt Mailing Address 435 E 79th St 2012 04 17 City Zip Code State Transaction ID: C1642306 NY New York 10075-1076 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation North Shore Univ Hosp Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 1333.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 108 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Joshua B Moskovitz Date of Receipt Mailing Address 435 E 79th St 2012 22 City Zip Code State Transaction ID: C1667502 NY New York 10075-1076 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation North Shore Univ Hosp Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Joshua B Moskovitz Date of Receipt Mailing Address 435 E 79th St 06 15 2012 City State Zip Code Transaction ID: C1772043 NY New York 10075-1076 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation North Shore Univ Hosp Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. John Bruce Moskow Date of Receipt Mailing Address 2201 Plumbrook Dr 2012 06 19 City Zip Code State Transaction ID: C1772134 TX Austin 78746-6233 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Emer Svc Prtnrs La Costa Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1166.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 109 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Carla Elizabeth Murphy Date of Receipt Mailing Address 1196 Preserve Cir 04 2012 City State Zip Code Transaction ID: C1642718 CO 80401-7045 Golden Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Emer Svc Phys PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Scott B Murray Date of Receipt Mailing Address 1 Sandy Way 2012 05 01 City State Zip Code Transaction ID: C1651330 MA Ayer 01432-1590 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Dr. Scott B Murray **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Scott B Murray Date of Receipt Mailing Address 1 Sandy Way 2012 06 28 City Zip Code State Transaction ID: C1776210 MA Ayer 01432-1590 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Dr. Scott B Murray **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	IMBER	:	PAGE	1	10 OF	-	22
Use separate schedule(s) for each category of the	(che	ck only	or or	ne)						
Detailed Summary Page	X	11a		11b		11c		12		
, 0		13		14		15		16		11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) J Brent Myers Date of Receipt Mailing Address 2105 Glenwood Ave 04 2012 City State Zip Code Transaction ID: C1642258 27608-1441 NC Raleigh Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Wake Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. J Brent Myers Date of Receipt Mailing Address 2105 Glenwood Ave 05 2012 15 City State Zip Code Transaction ID: C1663828 NC Raleigh 27608-1441 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. J Brent Myers Date of Receipt Mailing Address 2105 Glenwood Ave 2012 06 12 City State Zip Code Transaction ID: C1768680 NC Raleigh 27608-1441 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Wake Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)		7	Ξ		7		15	50.00)	
TOTAL This Period (last page this line number only)	Ξ	7		_	7	_			_	

250.00

Other (specify)

FOR LINE NUMBER: PAGE 111 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John H Myers Date of Receipt Mailing Address 7505 Primrose Dr 08 2012 City State Zip Code Transaction ID: C1656786 TX Irving 75063-8435 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Questcare Med Svcs **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael D Nauss Date of Receipt Mailing Address 2759 Calloway Ct 17 2012 04 City State Zip Code Transaction ID: C1642343 MI Canton 48188-6307 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Univ of Cincinnati Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Steven Nazario Date of Receipt Mailing Address 7597 Saint Stephens Ct 2012 05 23 City State Zip Code Transaction ID: C1668400 FL Orlando 32835-6526 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 112 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ira R Nemeth Date of Receipt Mailing Address 1408 Vermont St 04 2012 City State Zip Code Transaction ID: C1642325 77006-1071 TX Houston Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Dr. Ira R Nemeth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ira R Nemeth Date of Receipt Mailing Address 1408 Vermont St 2012 05 22 City State Zip Code Transaction ID: C1667504 TX Houston 77006-1071 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Dr. Ira R Nemeth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ira R Nemeth Date of Receipt Mailing Address 1408 Vermont St 2012 06 15 City Zip Code State Transaction ID: C1772039 TX Houston 77006-1071 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Dr. Ira R Nemeth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 113 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Patricia Nichols Date of Receipt Mailing Address 911 Home Grove Dr 2012 23 City State Zip Code Transaction ID: C1668283 FL Winter Garden 34787-6514 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey R Nickel Date of Receipt Mailing Address 2300 N Black Oak Dr 04 2012 17 City State Zip Code Transaction ID: C1642286 IN Angola 46703-8195 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Pro Emer Phys Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Jeffrey R Nickel Date of Receipt Mailing Address 2300 N Black Oak Dr 2012 05 22 City State Zip Code Transaction ID: C1667505 IN Angola 46703-8195 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Pro Emer Phys Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 1166.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 114 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jeffrey R Nickel Date of Receipt Mailing Address 2300 N Black Oak Dr 2012 City State Zip Code Transaction ID: C1772030 IN Angola 46703-8195 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Pro Emer Phys Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Brian Nobie Date of Receipt Mailing Address 9712 Lake Hugh Dr 2012 05 23 City State Zip Code Transaction ID: C1668284 FL Gotha 34734-4629 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ashley Booth Norse Date of Receipt Mailing Address 655 W 8th St 2012 05 24 Shands Jacksonville Educ City Zip Code State Transaction ID: C1669356 FL Jacksonville 32209-6511 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Univ of FL **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1333.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR	LINE NU	JMBER:	:	PAGE	115	OF	22
Use separate schedule(s)	(checl	k only o	ne)					
for each category of the Detailed Summary Page	X	11a	11b		11c	12		
		13	14		15	16		\Box_{17}

		<u> </u>
	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) Ashley Booth Norse		Date of Receipt
Mailing Address 655 W 8th St		M = M / D = D / Y = Y = Y
Shands Jacksonville Educ		06 15 2012
City	State Zip Code	Transaction ID : C1772040
Jacksonville	FL 32209-6511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Univ of FL	Emergency Physician	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Jeffrey G Norvell		Date of Receipt
Mailing Address 5345 Norwood St	M = M / D = D / Y = Y = Y	
City	State Zip Code	05 04 2012
Fairway	KS 66205-2647	Transaction ID : C1654187
<u> </u>	100 00203-2047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
University of Kansas Hospital	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Ramon Nunez		Date of Receipt
Mailing Address 7926 Saint Giles PI		05 23 _ 2012 _
City	State Zip Code	Transaction ID : C1668402
Orlando	FL 32835-7909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
FL Emer Phys Kang & Assoc	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	only)	
	•	

	FOF	R LINE	NU	IMBER	:	PAGE	. 1	16 OF	=	22
Use separate schedule(s) for each category of the	(che	ck only	or	ne)						
Detailed Summary Page		11a		11b		11c		12		
,,		13		14		15		16		11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Paul Blake O'Brien Date of Receipt Mailing Address 2820 Lincroft Ave 2012 23 City State Zip Code Transaction ID: C1668393 FL Orlando 32814-6765 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Emergency Physician** FL Emer Phys Kang & Assoc Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert E O'Connor Date of Receipt Mailing Address 515 Foxdale Ln 04 2012 17 City Zip Code State Transaction ID: C1642338 Charlottesvle VΑ 22903-9201 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Univ of VA HIth Svc-Dept of EM **Emergency Physician**

	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
c.			Date of Receipt
	Mailing Address 1320 Webster St		05 23 2012
	City	State Zip Code	Transaction ID : C1668286
	Orlando	FL 32804-2855	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	1
	FL Emer Phys Kang & Assoc	Emergency Physician	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	- -

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

FOR LINE NUMBER: PAGE 117 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brian S Oliver Date of Receipt Mailing Address 4165 S Bevwood Cir 2012 City State Zip Code Transaction ID: C1772370 UT Salt Lake Cty 84124-3080 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Dr. Brian S Oliver **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian S Oliver Date of Receipt Mailing Address 4165 S Bevwood Cir 06 29 2012 City State Zip Code Transaction ID: C1775413 UT Salt Lake Cty 84124-3080 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Dr. Brian S Oliver **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Ott Date of Receipt Mailing Address 1001 Ogden St 2012 04 10 City Zip Code State Transaction ID: C1632776 CO Denver 80218-2807 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Apex Emerg Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 118 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sam L Paczkowski Date of Receipt Mailing Address 5832 Canyonwoods Dr 04 2012 City Zip Code State Transaction ID: C1647428 MT 59106-9702 Billings Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation St Vincent Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ernest Page II Date of Receipt Mailing Address 11030 Ullswater Ln 2012 05 23 City State Zip Code Transaction ID: C1668404 FL Windermere 34786-5411 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ketan Pandya Date of Receipt Mailing Address 13049 Water Point Blvd 2012 Florida Hospital Kissimmee 05 23 City Zip Code State Transaction ID: C1668387 FL Windermere 34786-5818 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 119 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Orlee Israeli Panitch Date of Receipt Mailing Address 11753 Gainsborough Rd 07 2012 City Zip Code State Transaction ID : C1655012 MD Potomac 20854-3247 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation Shady Grove Adventist Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Phillip Parker Date of Receipt Mailing Address 555 W Webb Rd 06 2012 11 City State Zip Code Transaction ID: C1765969 TN 37060-4028 Eagleville Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Southeastern Emerg Care PLLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joshua R Parker Date of Receipt Mailing Address 11412 Rancho Villa Verde Pl 2012 05 24 City Zip Code State Transaction ID: C1669371 NV Las Vegas 89138-1594 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 120 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Rebecca B Parker Date of Receipt Mailing Address 423 Engel Blvd 04 2012 City State Zip Code Transaction ID: C1642339 Park Ridge IL 60068-4456 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Dr. Rebecca B Parker **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles F Pattavina MD, FACEP Date of Receipt Mailing Address 360 Broadway 04 17 2012 City State Zip Code Transaction ID: C1642315 ME Bangor 04401 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation St Joseph Hosp Bangor, ME **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charles F Pattavina MD, FACEP Date of Receipt Mailing Address 360 Broadway 2012 05 22 City State Zip Code Transaction ID: C1667506 MF Bangor 04401 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation St Joseph Hosp Bangor, ME **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 121 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Charles F Pattavina MD, FACEP Date of Receipt Mailing Address 360 Broadway 2012 06 City Zip Code State Transaction ID: C1772006 ME Bangor 04401 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation St Joseph Hosp Bangor, ME **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christine Mae Patton Date of Receipt Mailing Address 111 Hibernia Dr 06 19 2012 City State Zip Code Transaction ID: C1772139 PA Harmony 16037-8519 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Weirton Medical Center **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lee E Payne Date of Receipt Mailing Address 6323 Wilmington Dr 2012 04 17 City State Zip Code Transaction ID: C1642275 Burke VA 22015-4070 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation HQ Air Force Space Command **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 683.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 122 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Lee E Payne Date of Receipt Mailing Address 6323 Wilmington Dr 2012 22 City State Zip Code Transaction ID: C1667507 VA Burke 22015-4070 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation **HQ Air Force Space Command Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Lee E Payne Date of Receipt Mailing Address 6323 Wilmington Dr 2012 06 15 City State Zip Code Transaction ID: C1772022 VA Burke 22015-4070 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation HQ Air Force Space Command **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Bradley V Pearson Date of Receipt Mailing Address 757 N Kalaheo Ave 2012 04 18 City State Zip Code Transaction ID: C1642717 HI Kailua 96734-1970 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation U.S Army **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 366.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 123 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Bradley V Pearson Date of Receipt Mailing Address 757 N Kalaheo Ave 2012 02 City State Zip Code Transaction ID: C1666329 Kailua HI 96734-1970 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation U.S Army **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Vanessa C Peluso Date of Receipt Mailing Address 1768 Elizabeths Walk 2012 05 23 City State Zip Code Transaction ID: C1668410 Winter Park FL 32789-5948 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. David J Pillow Jr Date of Receipt Mailing Address 5332 Wateka Dr 2012 05 10 City Zip Code State Transaction ID: C1658280 TX **Dallas** 75209-5512 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation self **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 124 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) George Podgorny Date of Receipt Mailing Address 2115 Georgia Ave 04 05 2012 City Zip Code State Transaction ID: C1625951 NC Winston Salem 27104-1917 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Moses H Cone Meml Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. W Randall Poole Date of Receipt Mailing Address 1110 SW Ivanhoe Blvd 2012 05 23 City State Zip Code Transaction ID: C1668391 FL Orlando 32804-6370 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 2012 04 17 City State Zip Code Transaction ID: C1642274 PΑ Lancaster 17601-5193 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Lancaster Regional Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 1583.33 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER	₹:	PAGE	125 OF	227
Use separate schedule(s) for each category of the	(check only one)				
Detailed Summary Page	X 11a 11b		11c	12	
=	13 14		15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 2012 City State Zip Code Transaction ID: C1667508 PΑ Lancaster 17601-5193 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Lancaster Regional Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 2012 06 15 City State Zip Code Transaction ID: C1772041 PA Lancaster 17601-5193 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Lancaster Regional Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Sanjay K Premakumar Date of Receipt Mailing Address 1406 Shepherd St 2012 04 11 City Zip Code State Transaction ID: C1642238 NC Durham 27707-1649 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Wake Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

266.66

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 126 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sanjay K Premakumar Date of Receipt Mailing Address 1406 Shepherd St 2012 15 City Zip Code State Transaction ID: C1663811 NC 27707-1649 Durham Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Wake Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sanjay K Premakumar Date of Receipt Mailing Address 1406 Shepherd St 06 2012 12 City State Zip Code Transaction ID: C1768669 NC Durham 27707-1649 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Wake Emer Phys PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Hannon Proctor Date of Receipt Mailing Address 5004 Bentgrass Ct 2012 04 11 City Zip Code State Transaction ID: C1634258 TN Franklin 37069-7254 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Team Health **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 127 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Karen Agape Quaday Date of Receipt Mailing Address 640 Jackson St Regions Hosp ED 01 2012 City Zip Code State Transaction ID: C1651320 MN Saint Paul 55101-2502 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Regions Hosp ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. John M Quinn Date of Receipt Mailing Address 13702 Keneva Dr 2012 05 07 City State Zip Code Transaction ID: C1655007 TX Cypress 77429-4870 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Kingwood Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Alexandr Rafailov Date of Receipt Mailing Address 9 Fieldstone Rd 2012 05 24 City State Zip Code Transaction ID: C1669380 CT Stamford 06902-2575 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation The Stamford Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR	LINE N	JU	MBER	:	PAGE	: 1	28 OF	2	27
Use separate schedule(s)	(chec	k only	on	ıe)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
	- ·	13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personance name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) Mohan Rajaratnam Mailing Address 4703 Shady Knoll Ave NW		Date of Receipt
City Massillon	State Zip Code OH 44646-9516	06 22 2012 Transaction ID : C1774732 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Stark County Emergency Physicians Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Laura D Rau Mailing Address 41 N Anguilla Rd		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City N Stonington	State Zip Code CT 06359-1755	Transaction ID : C1669365 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Brown Med Schl	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Gordon Dean Reed		Date of Receipt
Mailing Address 10 Oakknoll Cir	Charles 7'- Cools	04 25 2012
City Newark	State Zip Code DE 19711-2490	Transaction ID : C1644925 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer DFES	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	only)	

	FOR LINE NUMBER: PAGE	129 OF 227
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11c	12
, ,		16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John Joseph Reed Date of Receipt Mailing Address 2917 Hybart St 2012 City State Zip Code Transaction ID: C1772279 NC 28303-5916 Fayetteville Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Cape Fear Valley Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lars Hans Reinhart Date of Receipt Mailing Address 21942 Short Bow Ct 05 2012 22 City State Zip Code Transaction ID: C1668275 California MD 20619-2247 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee.

Name of Employer McLeod Reg Med Ctr Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Gonzalo Reyes Mailing Address 202 Laramie Dr		Date of Receipt 04 17 2012
City San Antonio	State Zip Code TX 78209-2346	Transaction ID : C1642205 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Baystate Med Ctr	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).		850.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 130 OF 227

TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other th			erson for the purpose of soliciting contributions to solicit contributions from such committee.
Name of committee (In Full) National Emergency M	edicine Political A	action Committee	
Full Name (Last, First, Middle Init Cheryl S Reynolds Mailing Address 996 Oakpoint Cit City Apopka FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary Other (specify)	State FL C Occupation Emergency Aggregate		Date of Receipt 05 23 2012 Transaction ID: C1668287 Amount of Each Receipt this Period
Full Name (Last, First, Middle Inimatche Matthew M Rice Mailing Address 8320 Goodman I City Gig Harbor FEC ID number of contributing federal political committee. Name of Employer Team Health Receipt For: Primary General Other (specify)	Or NW State WA C Occupation Emergency		Date of Receipt 04 24 2012 Transaction ID: C1644909 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Init Allen L Roberts Mailing Address 9125 Benview C City Fort Worth FEC ID number of contributing federal political committee. Name of Employer EMC Ltd Receipt For: Primary General Other (specify)	State TX C Occupation Emergency		Date of Receipt 05 23 2012 Transaction ID : C1669807 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page	,		3000.00
TOTAL This Period (last page this	line number only)	······	

FOR LINE NUMBER: PAGE 131 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sam S Roberts III Date of Receipt Mailing Address 6300 La Calma Dr Emer Svc Partners LP 01 2012 City Zip Code State Transaction ID: C1651315 TX 78752-3825 Austin Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Emer Svc Partners LP **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Laura M Robinson Date of Receipt Mailing Address 15025 S 39th PI 2012 04 06 City State Zip Code Transaction ID: C1625995 ΑZ Phoenix 85044-6636 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Dr. Laura M Robinson **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Laura M Robinson Date of Receipt Mailing Address 15025 S 39th PI 30 2012 04 City State Zip Code Transaction ID: C1649271 ΑZ Phoenix 85044-6636 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Dr. Laura M Robinson **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE		: PAGE	132 OF	227
Use separate schedule(s) for each category of the	(check only	one)			
Detailed Summary Page	X 11a	11b	11c	12	
, ,	13	14	15	16	17

or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Richard Dean Robinson Mailing Address 3913 Regency Dr City Deer Park FEC ID number of contributing federal political committee. Name of Employer Univ of TX at Houston Receipt For: Primary General Other (specify)	State Zip Code TX 77536-6190 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 30 2012 Transaction ID: C1673290 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Maritza Rodriguez Mailing Address 2336 Kettle Dr City Orlando FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code FL 32835-8129 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 23 2012 Transaction ID : C1668285 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Monica Rodriguez-De Jesus Mailing Address 140 Warsteiner Way City Melbourne Bch FEC ID number of contributing federal political committee. Name of Employer Univ of Puerto Rico Receipt For: Primary General Other (specify)	State Zip Code FL 32951-3981 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / 26 2012 Transaction ID : C1774467 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	3000.00
TOTAL This Period (last page this line number	only)	

	FOR LINE	NUMBER	: Page	E 133 C)F		
Use separate schedule(s)	(check only one)						
for each category of the Detailed Summary Page	X 11a	11b	11c	12			
,	13	14	15	16			

227

		13 14 15 16 17
Any information copied from such F or for commercial purposes, other t	Reports and Statements may not be sold or used by any persthan using the name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
,	Medicine Political Action Committee	
Full Name (Last, First, Middle In Fred P Romano	nitial)	Date of Receipt
Mailing Address 4516 Tuscana D	Or	05 08 _ 2012 _
City	State Zip Code	Transaction ID : C1656814
Sarasota	FL 34241-4201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
EMP	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggiogale Teal-lu-Dale ▼	
Other (specify)	1000.00	
Full Name (Last, First, Middle In B. David William Ross	itial)	Date of Receipt
Mailing Address 15340 Raton Rd	1	M M / D D / Y Y Y Y
	•	04 17 _2012 _
City	State Zip Code	Transaction ID : C1642341
Colorado Spgs	CO 80921-2140	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	250.00
Name of Employer	Occupation	1
Front EM Specialties Inc	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle In Richard Scott Ross	itial)	Date of Receipt
Mailing Address 8242 Summerfe	eldt Rd	M M / D D / Y Y Y Y
5 11 11- 0242 Guillinelle		05 07 2012
City	State Zip Code	Transaction ID : C1655030
Saginaw	MI 48609-9647	Amount of Each Receipt this Period
FEC ID number of contributing	C	250.00
federal political committee.	<u> </u>	255.00
Name of Employer	Occupation]
Covenant HlthCare	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page	e (optional)	1500.00
	` _	
TOTAL This Period (last page this	s line number only)	

FOR LINE NUMBER: PAGE 134 OF (check only one) X 11a 11b 12 11c

227 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Patricia A Ryan Date of Receipt Mailing Address 7040 E Soyaluna Pl 04 2012 City State Zip Code Transaction ID: C1642212 Tucson ΑZ 85715-3342 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Northwest Tucson Emerg Phy **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Ian Sack Date of Receipt Mailing Address 1550 N VIEW DR 2012 04 18 City State Zip Code Transaction ID: C1642720 FL Miami Beach 33140-4250 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Northwest Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. David Ian Sack Date of Receipt Mailing Address 1550 N VIEW DR 2012 04 23 City State Zip Code Transaction ID: C1647392 FL Miami Beach 33140-4250 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Northwest Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE I	NUMBER:	PAGE	E 135 OF	2
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummary r ago	13	1 4	15	16	

		1.0
	and Statements may not be sold or used by any period the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicin	ne Political Action Committee	
Full Name (Last, First, Middle Initial) Morton Elliot Salomon Mailing Address 125 Haviland Rd City Stamford FEC ID number of contributing federal political committee. Name of Employer St Vincents Med Ctr Receipt For: Primary General Other (specify)	State Zip Code CT 06903-3327 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 06 05 2012 Transaction ID: C1757423 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Tracy G Sanson Mailing Address 812 Lorena Rd City Lutz FEC ID number of contributing federal political committee. Name of Employer TEAMHealth Receipt For: Primary General Other (specify)	State Zip Code FL 33548-4589 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 04 17 2012 Transaction ID : C1642342 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Marc Santambrosio Mailing Address 7965 S Park PI City Orlando FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify) Other (specify)	State Zip Code FL 32819-4885 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 05 23 2012 Transaction ID : C1668288 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (options	al)	2250.00
TOTAL This Period (last page this line nur	mber only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 136 OF 227

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(cneck only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any proper name and address of any political committees	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) David D Sarkarati Mailing Address 415 E Pine St City Orlando FEC ID number of contributing federal political committee. Name of Employer FL Emer Phys Kang & Assoc Receipt For: Primary General Other (specify)	State Zip Code FL 32801-6623 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 23 2012 Transaction ID : C1668407 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Regis J Schladenhaufen Mailing Address 1394 Gabriel Ln City Warwick FEC ID number of contributing federal political committee. Name of Employer TeamHealth Receipt For: Primary General Other (specify)	State Zip Code PA 18974-6179 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 225.00	Date of Receipt 04 06 2012 Transaction ID: C1625992 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Regis J Schladenhaufen Mailing Address 1394 Gabriel Ln City Warwick FEC ID number of contributing federal political committee. Name of Employer TeamHealth Receipt For: Primary General Other (specify)	State Zip Code PA 18974-6179 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 225.00	Date of Receipt 04 26 2012 Transaction ID : C1649321 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		1225.00
TOTAL This Period (last page this line number	r only)	

	FOR LINE NUMBER:					PAGE	1	37 OF	=	227
Use separate schedule(s) for each category of the	`	ck only	or	ne)		_		_		
Detailed Summary Page	×	11a		11b		11c		12		_
, ,		13		14		15		16		17

	nd Statements may not be sold or used by any personal the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Nathaniel R Schlicher Mailing Address 4615 77th Ave NW		Date of Receipt
City	Chata 7in Cada	04 17 2012
City Gig Harbor	State Zip Code WA 98335-6532	Transaction ID : C1642328 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Wright State Univ	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Chet D Schrader Mailing Address 244 Oither View	'	Date of Receipt
Mailing Address 944 Gibbs Xing		04 07 _2012 _
City	State Zip Code	Transaction ID : C1625998
Coppell	TX 75019-7379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
WA Univ Schl of Med	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Chet D Schrader		Date of Receipt
Mailing Address 944 Gibbs Xing		05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Coppell	State Zip Code TX 75019-7379	Transaction ID : C1654638
Coppell	TX 75019-7379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
WA Univ Schl of Med	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: PAGE 138 OF (check only one) X 11a 11b 12 11c

227 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Chet D Schrader Date of Receipt Mailing Address 944 Gibbs Xing 07 2012 City State Zip Code Transaction ID: C1757459 TX Coppell 75019-7379 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation WA Univ Schl of Med **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Regan Andre Schwartz Date of Receipt Mailing Address 2446 Westminster Ter 2012 05 23 City State Zip Code Transaction ID: C1668399 FL Oviedo 32765-7503 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. John D Seidner Date of Receipt Mailing Address 15 Langford Rd 2012 04 19 City Zip Code State Transaction ID: C1647382 NH Candia 03034-2519 Amount of Each Receipt this Period FEC ID number of contributing 608.33 С federal political committee. Name of Employer Occupation Elliot Health System **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 608.33 Other (specify) 1658.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE N	NUMBER:	PAGE	E 139 OF	2
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummun, rugo	13	14	15	16	П.

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Gregory L Shangold Mailing Address 66 Beacon Hill Dr City Storrs Manfld FEC ID number of contributing federal political committee. Name of Employer NE Emer Med Spec Receipt For: Primary General Other (specify)	State Zip Code CT 06268-2756 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Gregory L Shangold Mailing Address 66 Beacon Hill Dr City Storrs Manfld FEC ID number of contributing federal political committee. Name of Employer NE Emer Med Spec Receipt For: Primary General Other (specify)	State Zip Code CT 06268-2756 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 05 22 2012 Transaction ID : C1667509 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Gregory L Shangold Mailing Address 66 Beacon Hill Dr City Storrs Manfld FEC ID number of contributing federal political committee. Name of Employer NE Emer Med Spec Receipt For: Primary General Other (specify)	State Zip Code CT 06268-2756 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 06 15 2012 Transaction ID : C1772034 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<u> </u>	600.00
TOTAL This Period (last page this line number	r only)	

	FOR LINE	PAGE 140 OF			2	27		
Use separate schedule(s) for each category of the	(check onl	y one)				,		
Detailed Summary Page	X 11a	11b		11c		12		
, ,	13	14		15		16		17

		<u> </u>				
	d Statements may not be sold or used by any per- the name and address of any political committee t					
NAME OF COMMITTEE (In Full)						
National Emergency Medicine	e Political Action Committee					
Full Name (Last, First, Middle Initial) A. Paul M Sheehan	Date of Receipt					
Mailing Address 4923 Elm St	M = M / D = D / Y = Y = Y					
City	State Zip Code	06 11 2012 Transaction ID : C1767893				
Bellaire	TX 77401-2810	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer	Occupation	1				
TeamHealth	Emergency Physician	-				
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	300.00					
Full Name (Last, First, Middle Initial) 3. Jordan Robert Ship	Date of Receipt					
Mailing Address PO Box 529	M = M / D = D / Y = Y = Y					
City	State Zip Code	05 29 2012 Transaction ID : C1673243				
Walpole	MA 02081-0529	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	-				
S Shore Hosp	Emergency Physician					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	250.00					
Full Name (Last, First, Middle Initial) C. Joshua H Short	Date of Receipt					
Mailing Address 36 Auburndale Dr	05 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Asheville	State Zip Code NC 28806-9519	Transaction ID : C1651312				
		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer	Occupation	1				
Univ of KY - Lexington Receipt For:	Emergency Physician	_				
Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	500.00					
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	900.00				
TOTAL This Period (last page this line numb	per only)					

FOR LINE NUMBER: PAGE 141 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Paul R Sierzenski Date of Receipt Mailing Address 104 Ascot Ct Clairborne Estates 04 06 2012 City Zip Code State Transaction ID: C1625978 DE Bear 19701-2364 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Doctors Emer Svcs PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rhett Silver Date of Receipt Mailing Address 1 E Delaware PI 2012 05 24 City State Zip Code Transaction ID: C1669384 IL Chicago 60611-4982 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation Emer Med Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Weylin Sing Date of Receipt Mailing Address 11347 Ledgement Ln 2012 05 23 City State Zip Code Transaction ID: C1668289 FL Windermere 34786-6413 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 142 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Deepika Singh Date of Receipt Mailing Address 609 Richardson Rd 2012 24 City State Zip Code Transaction ID: C1669372 NY Rochester 14623-1241 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Brown Medical Sch Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Siva Sivanesan Date of Receipt Mailing Address 765 Bear Creek Cir 2012 05 23 City State Zip Code Transaction ID: C1668406 FL Winter Spgs 32708-3892 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation FL Emer Phys Kang & Assoc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Todd Slesinger Date of Receipt Mailing Address 427 Daub Ave 2012 04 17 City Zip Code State Transaction ID: C1642314 NY Hewlett 11557-1136 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation North Shore Univ Hosp Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 143 OF 227

Т	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check online)	y one) 11b 14	11c	12 16	17
	ny information copied from such Reports and Sta for commercial purposes, other than using the					soliciting		utions
\rangle	Name of committee (In Full) National Emergency Medicine Po	olitical A	ction Committee					
Δ.	Full Name (Last, First, Middle Initial) Todd Slesinger Mailing Address 427 Daub Ave City Hewlett FEC ID number of contributing federal political committee. Name of Employer North Shore Univ Hosp Emer Phys Receipt For: Primary General Other (specify)	State NY C Occupation Emergency Aggregate		05 Trans	f Receipt / 22 saction ID: C		nis Period	
3.	Full Name (Last, First, Middle Initial) Todd Slesinger Mailing Address 427 Daub Ave City Hewlett FEC ID number of contributing federal political committee. Name of Employer North Shore Univ Hosp Emer Phys Receipt For: Primary General Other (specify) ▼	State NY C Occupation Emergency Aggregate		06 Trans	f Receipt 15 Saction ID: C		nis Period	d 0.00
D.	Full Name (Last, First, Middle Initial) Virgil W Smaltz Mailing Address 24 Bay View Ter City Geneva FEC ID number of contributing federal political committee. Name of Employer Wheeling Hosp Receipt For: Primary General Other (specify)	State NY C Occupation Emergency Aggregate		05 Trans	f Receipt / 22 saction ID : 0 t of Each Re		nis Period	
	UBTOTAL of Receipts This Page (optional)			F	7	- 7	283	3.33
T	OTAL This Period (last page this line number o	nly)	······		-	- 1		

FOR LINE NUMBER: PAGE 144 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 08 2012 City State Zip Code Transaction ID: C1767802 NY Geneva 14456-9768 Amount of Each Receipt this Period FEC ID number of contributing C 8.00 federal political committee. Name of Employer Occupation Wheeling Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 382.66 Other (specify) Full Name (Last, First, Middle Initial) B. Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 06 2012 15 City State Zip Code Transaction ID: C1772056 NY 14456-9768 Geneva Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Wheeling Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 382.66 Other (specify) Full Name (Last, First, Middle Initial) c. Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 2012 06 29 City State Zip Code Transaction ID: C1776096 NY Geneva 14456-9768 Amount of Each Receipt this Period FEC ID number of contributing 8.00 С federal political committee. Name of Employer Occupation Wheeling Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 382.66 Other (specify) 99.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 145 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sullivan K Smith Date of Receipt Mailing Address 1 Medical Center Blvd 07 2012 City State Zip Code Transaction ID: C1666197 TN Cookeville 38501-4294 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation VMG **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sullivan K Smith Date of Receipt Mailing Address 1 Medical Center Blvd 2012 05 22 City State Zip Code Transaction ID: C1667424 Cookeville TN 38501-4294 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **VMG Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) c. Roger L Smoke Date of Receipt Mailing Address PO Box 584 2012 04 09 City Zip Code State Transaction ID: C1633290 NY New York 10025-0010 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Renaissance Healthcare Network **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 146 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

227

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Aaron M Snyder Date of Receipt Mailing Address 9925 Silver Brook Dr 07 2012 City Zip Code State Transaction ID: C1655017 MD Rockville 20850-3653 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation Montgomery Emerg Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Peter Erik Sokolove Date of Receipt Mailing Address 3889 Exmoor Cir 2012 06 15 City State Zip Code Transaction ID: C1772005 CA Sacramento 95864-5904 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Univ of CA - Davis **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert C Solomon Date of Receipt Mailing Address 108 Saddle Ridge Dr 2012 04 17 City State Zip Code Transaction ID: C1642281 PΑ Oakdale 15071-3726 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Steel Vly Emer Phys **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 2333.33 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

	FO	R LINE	PAGE	- 1	47 OF	: :	22			
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

		13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) A. Robert C Solomon		Date of Receipt
Mailing Address 108 Saddle Ridge Dr		05 22 2012
City	State Zip Code	Transaction ID : C1667511
Oakdale	PA 15071-3726	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation]
Steel Vly Emer Phys	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	400.00	
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) 3. Robert C Solomon		Date of Receipt
Mailing Address 108 Saddle Ridge Dr		†
		06 15 2012
City	State Zip Code	Transaction ID : C1772017
Oakdale	PA 15071-3726	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.33
Name of Employer	Occupation	1
Steel Vly Emer Phys	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggrogate Tear-to-Date ▼	
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) David G Srour	<u> </u>	Date of Bassics
^		Date of Receipt
Mailing Address 10303 Coniston Ct		05 07 2012
City	State Zip Code	Transaction ID : C1655019
Potomac	MD 20854-1900	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	1
Medical Edge PSR	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)	2166.66
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: PAGE 148 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ryan Stanton Date of Receipt Mailing Address 1229 Birmingham Ln 04 2012 City State Zip Code Transaction ID: C1642313 KY Lexington 40513-1736 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation **MESA Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ryan Stanton Date of Receipt Mailing Address 1229 Birmingham Ln 2012 05 22 City State Zip Code Transaction ID: C1667513 KY Lexington 40513-1736 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **MESA Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ryan Stanton Date of Receipt Mailing Address 1229 Birmingham Ln 2012 06 15 Zip Code City State Transaction ID: C1772046 KY Lexington 40513-1736 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation **MESA Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 149 OF 227 Use s for ea Detail

	1 01		140	IVIDEI		17.00		-10 01	-	
separate schedule(s)	(check only one)									
ach category of the led Summary Page	X	11a		11b		11c		12		
The community range		13		14		15		16		17

		atements may not be sold or used by any perso name and address of any political committee to	
\ NA	AME OF COMMITTEE (In Full)		
\rangle N	ational Emergency Medicine P	olitical Action Committee	
Fu	Il Name (Last, First, Middle Initial)		
	Bary C Starr		Date of Receipt
Ма	ailing Address 5012 Russell Ave S		M = M / D = D / Y = Y = Y
<u> </u>	h.,	State 7:n Code	05 18 2012
Cit Mi	ty inneapolis	State Zip Code MN 55410-2209	Transaction ID : C1664389
_	·		Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	1000.00
Na	ame of Employer	Occupation	
	PPA	Emergency Physician	
Re	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1225.00	
L	Strict (specify)	122503	
	Il Name (Last, First, Middle Initial)		
	ric William Stern		Date of Receipt
Ма	ailing Address 2401 S 31st St		M = M / D = D / Y = Y = Y
Cit	TX A&M Scott & White Meml H	osp Eme State Zip Code	04 18 2012 Transaction ID : C1787816
	emple	TX 76508-0001	Transaction ID : C1787816 Amount of Each Receipt this Period
	EC ID number of contributing		Amount of Edon Hooopt this Follow
	deral political committee.	C	100.00
Na	ame of Employer	Occupation	
	omas Jefferson Univ	Emergency Physician	
Re	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	300.00	
E	II Name (Last First Middle Initial)		
	II Name (Last, First, Middle Initial) Fric William Stern		Date of Receipt
Ma	ailing Address 2401 S 31st St		M = M / D = D / Y = Y = Y
	TX A&M Scott & White Meml H		05 22 2012
Cit	•	State Zip Code TX 76508-0001	Transaction ID : C1787815
_	emple	TX 76508-0001	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	100.00
Na	ame of Employer	Occupation	
	nomas Jefferson Univ	Emergency Physician	
Re	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General	300.00	
L	Other (specify) ▼	300.00	
SUR	TOTAL of Receipts This Page (optional)		1200.00
300	TOTAL OF HECEIPIS THIS FAGE (OPHOHAI)		
TOT	AL This Period (last page this line number o	nly)	

	FOR LINE NUMBER: PAGE 15	50 OF 227							
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X 11a 11b 11c	12							
_ come common , age	13 14 15	16 17							

	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Eric William Stern Mailing Address 2401 S 31st St TX A&M Scott & White Me City Temple FEC ID number of contributing federal political committee. Name of Employer Thomas Jefferson Univ Receipt For: Primary General Other (specify)	State Zip Code TX 76508-0001 C Occupation Emergency Physician Aggregate Year-to-Date 300.00	Date of Receipt 06 15 2012 Transaction ID : C1776381 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Lawrence M Stock Mailing Address 20540 Pacific Coast Hwy City Malibu FEC ID number of contributing federal political committee. Name of Employer Antelope Valley Hosp Receipt For: Primary General Other (specify)	State Zip Code CA 90265-5402 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 30 2012 Transaction ID : C1670242 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Michael Stratemeier Mailing Address 7 Mulberry Ct City Holtsville FEC ID number of contributing federal political committee. Name of Employer North Shore Huntington Hosp Receipt For: Primary General Other (specify)	State Zip Code NY 11742-2526 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 06 11 2012 Transaction ID: C1765974 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional	l) >	1600.00
TOTAL This Period (last page this line num	her only)	

	FOR LINE NUMBER: PAGE 151 O	F 227							
Use separate schedule(s) for each category of the	(check only one)								
Detailed Summary Page	X 11a 11b 11c 12								
, ,	13 14 15 16	1 17							

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Thomas Jerome Sugarman Date of Receipt Mailing Address 1563 Solano Ave 2012 27 City State Zip Code Transaction ID: C1774852 CA Berkeley 94707-2116 Amount of Each Receipt this Period FEC ID number of contributing C 91.40 federal political committee. Name of Employer Occupation Sutter Delta Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1091.40 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Jerome Sugarman Date of Receipt Mailing Address 1563 Solano Ave 06 2012 27 City State Zip Code Transaction ID: C1776095 CA Berkeley 94707-2116 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Sutter Delta Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	1091.40	
Full Name (Last, First, Middle Initial) Robert Louis Sweeney		Date of Receipt
Mailing Address Jersey Shore Med Ctr 1945 Route 33		05 23 2012
City	State Zip Code	Transaction ID: C1669777
Neptune	NJ 07753	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Jersey Shore Medical Center	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1591.40

FOR LINE NUMBER: PAGE 152 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Terence J Sweeney Date of Receipt Mailing Address 925 Carolyn Ave 2012 08 City State Zip Code Transaction ID: C1767787 CA Modesto 95350-5209 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Memorial Medical Center ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 316.40 Other (specify) Full Name (Last, First, Middle Initial) B. Terence J Sweeney Date of Receipt Mailing Address 925 Carolyn Ave 06 2012 18 City State Zip Code Transaction ID: C1771994 CA 95350-5209 Modesto Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Memorial Medical Center ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 316.40 Other (specify) Full Name (Last, First, Middle Initial) c. Terence J Sweeney Date of Receipt Mailing Address 925 Carolyn Ave 2012 06 27 City State Zip Code Transaction ID: C1774530 CA Modesto 95350-5209 Amount of Each Receipt this Period FEC ID number of contributing 91.40 С federal political committee. Name of Employer Occupation Memorial Medical Center ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 316.40 Other (specify) 316.40 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 153 OF (check only one) X 11a 11b 12 11c

227 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Gary William Tamkin Date of Receipt Mailing Address 4 Valley High 2012 27 City Zip Code State Transaction ID: C1776110 CA Lafayette 94549-2418 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Occupation Mercy Med Ctr Merced, ED Dir **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Douglas N Tannas Date of Receipt Mailing Address 6339 Red Fox Rd 04 2012 10 City State Zip Code Transaction ID: C1632779 Pendleton IN 46064-8732 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **EMGI Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Scott Thomas Date of Receipt Mailing Address 489 State St 2012 06 27 Eastern Maine Med Ctr ED City Zip Code State Transaction ID: C1775264 MF Bangor 04401-6616 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Eastern Maine Med Ctr ED **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOF	FOR LINE NUMBER: PAGE 154 OF							
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
		13		14		15		16	П1

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) Jeffrey B Thompson Mailing Address PO Box 12779		Date of Receipt
maming state of C Box 12110		05 14 _ 2012 _
City	State Zip Code	Transaction ID : C1666376
Beaumont	TX 77726-2779	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Meml Herman Baptist Beaumont	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) 3. Bryce Tiller		Date of Receipt
Mailing Address 917 1st St N		06 29 2012
City	State Zip Code	Transaction ID : C1775411
Jax Bch	FL 32250-9106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
Meml Hosp Jacksonville	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)		Date of Descript
Mario Elizabeth Trabulsy		Date of Receipt
Mailing Address 1086 Braeloch Rd		05 31 _ 2012 _
City	State Zip Code	Transaction ID : C1672797
Colchester	VT 05446-7478	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Dr. Mario Elizabeth Trabulsy	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		950.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 155 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David N Trickey Date of Receipt Mailing Address 3612 Ben Hogan Ln 2012 City Zip Code State Transaction ID: C1765968 MT Billings 59106-1037 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Martin Army Cmnty Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeremy David Tucker Date of Receipt Mailing Address 23959 Meredith Ct 04 2012 23 City State Zip Code Transaction ID: C1644553 Hollywood MD 20636-2172 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Medical Emergency Professionals **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph Adrian Tyndall Date of Receipt Mailing Address PO Box 10186 2012 04 17 Univ of FL - Dept of EM City Zip Code State Transaction ID: C1642285 FL Gainesville 32610-0001 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Univ of FL - Dept of EM **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 333.32 Other (specify) 1333.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR I	LINE I	١U	MBER:	PAGE	1:	56 OF
Use separate schedule(s)	(check	c only	on	e)			
for each category of the Detailed Summary Page	X 1	I1a		11b	11c		12
,,	1	13		1/	15		16

227

		13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicine P	olitical Action Committee	
Full Name (Last, First, Middle Initial) A. Kurt Edward Urban		Date of Receipt
Mailing Address 204 E Hall St		05 07 _ 2012 _
City Savannah	State Zip Code GA 31401-5752	Transaction ID : C1655027 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Georgia Emergency Associates Receipt For:	Occupation Emergency Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Vincent G Valente Mailing Address 2220 Via Tuscany		Date of Receipt
City	State Zip Code	05 23 2012 Transaction ID : C1668396
Winter Park	FL 32789-1239	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer FL Emer Phys Kang & Assoc	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Philip C Van Dongen		Date of Receipt
Mailing Address 148 Gov Eden House Road		06 29 2012
City Merry Hill	State Zip Code NC 27957-9444	Transaction ID : C1775416 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Dr. Philip C Van Dongen Receipt For:	Emergency Physician	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1750.00
TOTAL This Period (last page this line number of	only)	

	FOR L	INE NU	IMBER	:	PAGE	: 1	57 OF	
Use separate schedule(s)	(check	only or	ne)					
for each category of the	X 11	la 🗀	11b		11c		12	
Detailed Summary Page	Ⅰ 💾…	·~		-				_
	I I 13	3	14		15		16	

227

An or	y information copied from such Reports and Stator commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
_	NAME OF COMMITTEE (In Full)		
	National Emergency Medicine Po	olitical Action Committee	
١.	Full Name (Last, First, Middle Initial) Neil Wang		Date of Receipt
	Mailing Address 255 N Sierra St		06 26 _ 2012 _
	City	State Zip Code	Transaction ID : C1774768
	Reno	NV 89501-1368	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	
	Dr. Neil Wang	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
3.	Full Name (Last, First, Middle Initial) Matthew J Watson		Date of Receipt
	Mailing Address 1280 Longpointe Pass		M = M / D = D / Y = Y = Y
			05 22 2012
	City	State Zip Code	Transaction ID : C1667440
	Alpharetta	GA 30005-2284	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	Northside Emer Assoc	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	250.00	
_	Full Name (Last, First, Middle Initial) Michael L Weaver		Date of Receipt
٠.	Mailing Address 4505 Headwood Dr		
			04 18 2012
	City Kansas City	State Zip Code MO 64111-3439	Transaction ID : C1642733
	<u> </u>		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	
	Hospital Emer Phys	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	500.00	
	Other (specify) ▼	300.00	
SI	UBTOTAL of Receipts This Page (optional)		1250.00
_	STAL This Deviced Contact of the Con	phd.	
T	OTAL This Period (last page this line number o	nıy)	

	FOR	LINE N	IUMBER	:	PAGE	: 1	58 OF	227
Use separate schedule(s)	(checl	k only o	one)					
for each category of the Detailed Summary Page	X	11a	11b		11c		12	
	l 🖂	13	14		15		16	7 17

		1.0
	and Statements may not be sold or used by any per-	
NAME OF COMMITTEE (In Full) National Emergency Medicir	ne Political Action Committee	
Full Name (Last, First, Middle Initial) L K Webb Mailing Address 3948 3rd St S		Date of Receipt M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
City Jax Bch FEC ID number of contributing federal political committee.	State Zip Code FL 32250-5847	Transaction ID : C1642310 Amount of Each Receipt this Period 84.00
Name of Employer Univ of FL Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 504.00	-
Full Name (Last, First, Middle Initial) L K Webb Mailing Address 3948 3rd St S		Date of Receipt 05 22 2012
City Jax Bch FEC ID number of contributing federal political committee.	State Zip Code FL 32250-5847	Transaction ID : C1667434 Amount of Each Receipt this Period 84.00
Name of Employer Univ of FL Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 504.00	-
Full Name (Last, First, Middle Initial) L K Webb Mailing Address 3948 3rd St S		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jax Bch FEC ID number of contributing federal political committee. Name of Employer Univ of FL Receipt For: Primary General Other (specify) ▼	State Zip Code FL 32250-5847 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 504.00	Transaction ID : C1772042 Amount of Each Receipt this Period 84.00
SUBTOTAL of Receipts This Page (options	al)	252.00
TOTAL This Period (last page this line nun	nber only)	

FOR LINE NUMBER: PAGE 159 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kevin John Weber Date of Receipt Mailing Address 3 Encino PI 01 2012 City Zip Code State Transaction ID: C1651326 CO 81005-2948 Pueblo Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **SCES Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Alan L Weiner Date of Receipt Mailing Address 217 Chesterwood Ter 2012 05 24 City State Zip Code Transaction ID: C1669379 CT Southington 06489-1368 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Dr. Alan L Weiner **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ian R Welsh Date of Receipt Mailing Address 1027 Gardenia St 2012 05 24 City Zip Code State Transaction ID: C1669362 SC Fort Mill 29708-5712 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation OUCOM/Doctors Hosp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 160 OF 227 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Richard Preston Wendell Date of Receipt Mailing Address 925 Royall Ave 04 2012 City Zip Code State Transaction ID: C1642643 SC Mt Pleasant 29464-5037 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Palmetto Hlth Richland Meml **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** David E Wilcox Date of Receipt Mailing Address 8 Aspen Dr 2012 05 22 City State Zip Code Transaction ID: C1667423 CT S Glastonbury 06073-2938 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Dr. David E Wilcox **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. David Wirtz Date of Receipt Mailing Address 1 Highgate NE 2012 04 28 City Zip Code State Transaction ID: C1649288 NY Ithaca 14850-1483 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE	161 OF
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11c	12
	12 14 15] ₁₆ [

227

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Alfred L Woodard Mailing Address 222 Winship Dr		Date of Receipt O5 15 2012
City Leesburg FEC ID number of contributing	State Zip Code GA 31763-5343	Transaction ID : C1663792 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer SWEP Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Gary Newman Yee Mailing Address 15611 Oyster Cove Dr City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Sugar Land FEC ID number of contributing federal political committee.	TX 77478-3364	Amount of Each Receipt this Period
Name of Employer GHEP Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mark Zeitzer Mailing Address 8127 SW 54th Ave City	State Zip Code	Date of Receipt 04 27 2012 Transaction ID : C1649290
Portland FEC ID number of contributing federal political committee. Name of Employer Silverton Hospital Receipt For: Primary General Other (specify) ▼	OR 97219-3204 C Occupation Emergency Physician Aggregate Year-to-Date 249.60	Amount of Each Receipt this Period 41.60
SUBTOTAL of Receipts This Page (optional)	>	541.60
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 162 OF 227 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mark Zeitzer Date of Receipt Mailing Address 8127 SW 54th Ave 01 2012 City Zip Code State Transaction ID: C1757411 OR Portland 97219-3204 Amount of Each Receipt this Period FEC ID number of contributing C 41.60 federal political committee. Name of Employer Occupation Silverton Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) Full Name (Last, First, Middle Initial) B. Gary David Zimmer Date of Receipt Mailing Address 1201 Langhorne Newtown Rd St Marys Med Ctr 2012 04 16 City State Zip Code Transaction ID: C1642647 PA Langhorne 19047-1233 Amount of Each Receipt this Period FEC ID number of contributing 1.00 federal political committee. Name of Employer Occupation St Marys Med Ctr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 501.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 42.60 SUBTOTAL of Receipts This Page (optional)..... 187170.07 TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 OF 227 (check only one) 11a 11b 11c 12 13 14 15 16 🗙 17
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political A	ction Committee	
A .	Full Name (Last, First, Middle Initial) SMITH BARNEY			Date of Receipt
	Mailing Address 1050 Connecticut Ave NW			04 30 2012
	City Washington	State DC	Zip Code 20036-5308	Transaction ID : C1667437 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		37.85
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.95	
В.	Full Name (Last, First, Middle Initial) SMITH BARNEY			Date of Receipt
	Mailing Address 1050 Connecticut Ave NW			05 31 2012
	City Washington	State DC	Zip Code 20036-5308	Transaction ID : C1766483 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		633.15
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.95]
<u> </u>	Full Name (Last, First, Middle Initial) SMITH BARNEY			Date of Receipt
	Mailing Address 1050 Connecticut Ave NW			06 30 2012
	City Washington	State DC	Zip Code 20036-5308	Transaction ID : C1786173 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		0.42
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.95	
s	UBTOTAL of Receipts This Page (optional))	671.42

TOTAL This Period (last page this line number only).....

671.42

Use separate schedule(s) for each category of the Detailed Summary Page	2012
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. Snowe For Senate Mailing Address P.O. Box 2006 City State Zip Code ME O4104 FEC ID number of contributing federal political committee. Name of Employer C C00291955 Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	X 16 17 contributions committee.
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting or or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such of the purpose of soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such of the purpose of soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such of the purpose of soliciting or for committee. NAME OF COMMITTEE (In Full)	contributions committee.
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such of NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. Snowe For Senate Mailing Address P.O. Box 2006 City State Zip Code ME 04104 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt Date of Receipt	y y y y y y 2012 Period
National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Snowe For Senate Mailing Address P.O. Box 2006 City Portland ME 04104 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2012 Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) MALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt Transaction ID: C1656754 Amount of Each Receipt this Aggregate Year-to-Date ▼ 2000.00 Date of Receipt	2012 Period
Full Name (Last, First, Middle Initial) Snowe For Senate Mailing Address P.O. Box 2006 City State Zip Code ME 04104 Portland ME 04104 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt Amount of Each Receipt Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt	2012 Period
A. Snowe For Senate Mailing Address P.O. Box 2006 City State Zip Code Portland ME 04104 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt Transaction ID : C1656754 Amount of Each Receipt this C 00291955 Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt	2012 Period
Mailing Address P.O. Box 2006 City State Zip Code ME 04104 Portland ME 04104 FEC ID number of contributing federal political committee. Name of Employer C C00291955 Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	2012 Period
City State Zip Code ME 04104 Portland ME 04104 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE Transaction ID: C1656754 Amount of Each Receipt this Aggregate Year-to-Date ▼ 2000.00 Date of Receipt	Period
Portland ME 04104 Amount of Each Receipt this FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	
FEC ID number of contributing federal political committee. Name of Employer Occupation	
Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE C C00291955 Aggregate Year-to-Date ▼ 2000.00 Date of Receipt	2000.00
Receipt For: 2012 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	
Full Name (Last, First, Middle Initial) B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	
B. WALLY HERGER FOR CONGRESS COMMITTEE Date of Receipt	
Mailing Address PO Box 1007	Y Y Y
	2012
City State Zip Code Transaction ID : C1656755	
Willows CA 95988 Amount of Each Receipt this	Period
FEC ID number of contributing federal political committee.	2500.00
Name of Employer Occupation	
Receipt For: 2012 Aggregate Year-to-Date ▼	
Aggregate Year-to-Date ▼ Primary General	
Other (specify) ▼ 2500.00	
Full Name (Last, First, Middle Initial) C. Date of Receipt	
Mailian Adduses	Y = Y = Y
City State Zip Code	
Amount of Each Receipt this	Period
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	
Receipt For: Aggregate Year-to-Date ▼	
Primary General	
Other (specify) ▼	
SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (lest page this line number only)	4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 165 OF 227								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the									
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b						
Any information copied from such Reports and Statem	nonte may not be cold as									
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
National Emergency Medicine Polit	ical Action Commit	tee								
Full Name (Last, First, Middle Initial)			Data of Distance							
A. ALAMO PAC			Date of Disburseme	ent						
Mailing Address c/o 1020 North Fairfax Street			04 25	2012						
Suite 201	that 7: Cada									
,	State Zip Code VA 22314		Transaction ID : I	D127755						
Purpose of Disbursement										
Contributions for Federal PACs/Committees		011	Amount of Each Di	sbursement this Period						
Candidate Name		Category/ Type		5000.00						
Office Sought: House Disbursen	nent For: 2012	i ype								
	Primary General									
President State: District:	Other (specify) ▼ Annual contribu	tion								
Full Name (Last, First, Middle Initial)	Annual Continbu	uon								
B. AMERIPAC			Date of Disburseme	ent						
			M M / D D	/ Y Y Y Y Y						
Mailing Address 499 South Capitol, SW Suite 414			06 13	2012						
,	State Zip Code DC 20003		Transaction ID : D133885							
Purpose of Disbursement	20000									
Contributions for Federal PAC/Committees		011	Amount of Each Di	sbursement this Period						
Candidate Name		Category/ Type		2500.00						
Office Sought: House Disbursen	nent For: 2012									
	Primary General									
State: District:	Other (specify) ▼ Annual contribu	ition								
Full Name (Last, First, Middle Initial)										
C. Amodei for Nevada			Date of Disburseme	ent						
Mailing Address 503 N. Division Street			06 06	2012						
				20.2						
•	state Zip Code		Transaction ID : I	D133714						
Carson City Purpose of Disbursement	NV 89703									
Contributions for Federal Candidates		011	Amount of Each Di	sbursement this Period						
Candidate Name		Category/		1500.00						
Office Sought:	nent For: 2012	Type		1000.00						
	Primary General									
	Other (specify) ▼									
State: NV District: 02										
				9000.00						
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		3000.00						
TOTAL This Period (last page this line number only)										

SCHEDULE B (FEC Form 3X)		FOD : 111	R LINE NUMBER: PAGE 166 OF 227						
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only	NOMBER.						
I I LIVIIZED DISBURSEWEN IS	for each category of the	1 \ \ \ \ 21h	22 🔀 23 🗆 24 🗆 25 🖂 26						
	Detailed Summary Page	27	28a 28b 28c 29 30						
Any information copied from such Reports and Sta									
or for commercial purposes, other than using the n									
NAME OF COMMITTEE (In Full)									
National Emergency Medicine Po	olitical Action Commi	ttee							
Full Name (Last, First, Middle Initial)		-							
A. Amodei for Nevada			Date of Disbursement						
Amodel for Nevada			M M / D D / Y Y Y Y						
Mailing Address 503 N. Division Street			04 11 2012						
City	State Zip Code		Transaction ID : D127341						
Carson City Purpose of Disbursement	NV 89703								
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period						
Candidate Name									
		Category/ Type	2500.00						
Office Sought: House Disburs	sement For: 2012								
Senate	Primary General								
President	Other (specify) ▼								
State: NV District: 02									
Full Name (Last, First, Middle Initial)			Data of Diahuraament						
B. Austin Scott for Congress			Date of Disbursement						
Mailing Address PO Box 27750			05 02 2012						
			32 23.2						
City	State Zip Code		Transaction ID : D127961						
Macon	GA 31221								
Purpose of Disbursement Contributions for Federal Candidates			Amount of Each Disbursement this Period						
Candidate Name		0.40	oan or East Production this I shou						
		Category/ Type	1000.00						
Office Sought: House Disburs	sement For: 2012	71							
Senate	Primary General								
President	Other (specify) ▼								
State: GA District: 08									
Full Name (Last, First, Middle Initial)			Date of Disbursement						
C. Austin Scott for Congress									
Mailing Address PO Box 27750			06 06 2012						
City	State Zip Code		Transaction ID : D133723						
Macon Purpose of Disbursement	GA 31221								
Contributions for Federal Candidates		011	Assessment of Foods Dichessessment this Decised						
Candidate Name			Amount of Each Disbursement this Period						
		Category/ Type	1000.00						
Office Sought: House Disburs	sement For: 2012	71							
Senate	Primary General								
President	Other (specify) ▼								
State: GA District: 08									
			4500.00						
SUBTOTAL of Disbursements This Page (optional)	······	4500.00						
TOTAL This Pariod (last nage this line number or	hv)	_							
TOTAL This Period (last page this line number or	ıy <i>j</i>								

Use separate schedule(s)		OR LINE NUMBER: PAGE 167 OF 227 heck only one)							
for each category of the Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b							
	d by any perso	on for the purpose of soliciting contributions							
		Date of Disbursement							
		05 24 2012							
State Zip Code MI 49920		Transaction ID : D129098							
	011	Amount of Each Disbursement this Period							
	Category/ Type	1500.00							
ment For: 2012 Primary									
		Data of Dishusament							
		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
State Zip Code		Transaction ID - D424229							
CA 95758		Transaction ID : D134228							
	011 Category/ Type	Amount of Each Disbursement this Period 5000.00							
nent For: 2012 Primary General Other (specify)									
		Date of Disbursement							
		04 11 2012							
State Zip Code ND 58106		Transaction ID : D127340							
	011	Amount of Each Disbursement this Period							
ment For: 2012	Category/ Type	1500.00							
Primary General Other (specify) ▼									
		8000.00							
	······	0000.00							
	for each category of the Detailed Summary Page ments may not be sold or use me and address of any political tical Action Committed State Zip Code MI 49920 ment For: 2012 Primary General Other (specify) ment For: 2012	for each category of the Detailed Summary Page 21b 27							

2	CHEDULE B (FEC Form 3X)			_									OF 22	
	`				e(s) FOR LINE NUMBER: PAGE 16 (check only one)									
ITEMIZED DISBURSEMENTS			for each category of the			21b	OHE)	X	23		24 Г	25		26
		Detailed	Summary Page			27	288		28b		28c	29		30b
۸,	ny information copied from such Reports and Staten	nonte may	not be sold or us	od by	any	norco	n for th	o pur	70000	of col	iciting	ontribu	tions	
	for commercial purposes, other than using the nam													
$\overline{\ }$	NAME OF COMMITTEE (In Full)													
	National Emergency Medicine Polit	tical Act	ion Committ	-66										
	Tradicital Emergency Wedicite Folia	iloai 7 tot		.00										
	Full Name (Last, First, Middle Initial)													
Α.	Bill Cassidy for US Congress						Date	of Di	sburse	ment				
	NA 22 A 11					_	M	M /		D /		Y Y	Y	
	Mailing Address 8550 United Plaza Blvd Suite 1001						05	·	Ü	2		2012		
		State	Zip Code											
	Baton Rouge	LA	70809-2256				Trai	nsact	ion ID	: D12	27965			
	Purpose of Disbursement				-	_								
	Contributions for Federal Candidates			0	11		Amou	int of	Each	Disbu	ırseme	nt this	Period	
	Candidate Name			Cate		//						100	0.00	1
	Bill Cassidy			Ту	/pe				7		7	100	3.00	4
		nent For:												
		Primary Other (spe	General											
	State: LA District: 06	Other (spe	ony) \											
	Full Name (Last, First, Middle Initial)													
В.							Date	of Di	sburse	ment				
							M	M /	D	D /	Υ	YY	Υ	
	Mailing Address 8550 United Plaza Blvd						06	6	2	1		2012		
	Suite 1001													
	•	State LA	Zip Code 70809-2256				Tra	nsact	ion ID	: D1:	34213			
	Baton Rouge Purpose of Disbursement		70609-2256			_								
	Contributions for Federal Candidates			0	11		Amou	int of	Each	Disbu	ırseme	nt this	Period	
	Candidate Name			Cate	non	//		_	-	-	-		_	1
	Bill Cassidy				/pe	"			7		7	100	0.00	J
	Office Sought: House Disbursen	nent For:	2012											
		Primary	General											
		Other (spe	city) 🔻											
	State: LA District: 06 Full Name (Last, First, Middle Initial)					+								
C							Date	of Di	sburse	ment				
•	Bill Owens for Congress						M			D /	V	Y Y	V	
	Mailing Address PO Box 1575						05			2		2012		
	City	State	Zip Code				Tro	nsact	ion ID	: D12	27959			
	•	N 13 /					Ira							
	Plattsburgh	NY	12901-0286				ıra	15451						
	•	NY	12901-0286	0	11	\neg				Dish	ıroomo	nt thio	Dariad	
	Plattsburgh Purpose of Disbursement	NY	12901-0286		11					Disbu	ırseme	nt this	Period	
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates	NY	12901-0286	Cate	-	y/				Disbu	ırseme		Period 0.00	7
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name	NY nent For:		Cate	gor	<i>y</i> /				Disbu	urseme			
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate			Cate	gor	y/				Disbu	ırseme			
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President President	ment For:	2012 General	Cate	gor	y/				Disbu	urseme			
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate	nent For: Primary	2012 General	Cate	gor	y/				Disbu	urseme			
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: NY District: 23	nent For: Primary Other (spe	2012 General	Cate	egory /pe	y/				Disbu	urseme		0.00]
S	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President President	nent For: Primary Other (spe	2012 General	Cate	egory /pe	<i>y</i> // ▶				Disbu	urseme		0.00]
	Plattsburgh Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: NY District: 23	nent For: Primary Other (spe	2012 General	Cate Ty	egory pe	<u> </u>				Disbu	urseme		0.00	

SCHEDULI	E B (FEC Form 3X)	FOR LINE			NE NUMBER: PAGE 169 OF 227			
ITEMIZED	DISBURSEMENTS	for each cate	e schedule(s) egory of the	(check only				
		Detailed Sur		21b 27	22 X 23 28a 28			
Any information	copied from such Reports and Stater	nents may not	he sold or use					
	ial purposes, other than using the nan							
NAME OF C	COMMITTEE (In Full)							
National	Emergency Medicine Poli	tical Actior	Committe	ee				
Full Name (L	_ast, First, Middle Initial)							
A. Bill Owe	ns for Congress				Date of Disbur	rsement		
Mailing Addr	ess PO Box 1575				04 25 2012 Transaction ID : D127756			
	000 T O BOX 1070							
City			p Code					
Plattsburgh Purpose of I	Disbursement	NY 1	2901-0286			- -		
Contribution	ns for Federal Candidates			011	Amount of Eac	ch Disbursement this Period		
Candidate N	ame			Category/		1000.00		
Office County	ati A House	mant Fam. 35:		Type		1000.00		
Office Sough	nt: House Disburser Senate	nent For: 201: Primary	2 General					
	President	Other (specify)						
State: NY								
	Last, First, Middle Initial)				Data of District	vaamant		
B. Blue Do	g PAC				Date of Disbur			
Mailing Addr	ess 412 First Street, SE Suite 100				05	24 2012		
City			p Code		Transaction	ID : D129106		
Washington Purpose of I	Disbursement	DC 2	0003					
	ns for Federal PACs/Committees			011	Amount of Each Disbursement this Peri			
Candidate N	ame			Category/	5000.00			
Office Court	at: House Diskurs	nont Fore acc		Type		3000.00		
Office Sough	nt: House Disburser Senate	nent For: 201 Primary	2 General					
		Other (specify)						
State:	District:		nnual contributi	on				
	Last, First, Middle Initial)				Date of Diskers	roomont		
○ RKYDA	FOR CONGRESS				Date of Disbur			
Mailing Addr	ess P.O. BOX 8277				05 D	09 2012		
City		Stata 7	in Codo					
City THE WOODI			ip Code 7387		Transaction	ID : D128123		
Purpose of [Disbursement on Federal Candidates							
Contribution Candidate N				011	Amount of Eac	ch Disbursement this Period		
	evin Brady			Category/ Type		1000.00		
Office Sough		ment For: 201:	<u> </u> 2	- 7 8 9	7			
	Senate	Primary	General					
State: TV	President	Other (specify)	▼					
State: TX	District: 08							
SUBTOTAL of	Disbursements This Page (optional)					7000.00		
TOTAL This P	eriod (last page this line number only)							

	CHEDULE B (FEC Form 3X)	FOR LINE			NE NUMBER: PAGE 170 OF 227				
IT	EMIZED DISBURSEMENTS	for each	parate schedule(s) category of the	(check on		X 23	24	25 [26
_		Detailed	I Summary Page	27	28a	28b	28c	29	30b
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam								
5	NAME OF COMMITTEE (In Full)	o anu au	arcoo or arry politic	cai committee	io solicit cc	THE POLICE IS	noni Sucii CO	IIIIIII	··
$ \rangle$	National Emergency Medicine Polit	ical Ac	tion Commit	tee					
_	Full Name (Last, First, Middle Initial)				D.:	f District			
A.	Cantor For Congress				Date o	f Disbursen		Y	
	Mailing Address P. O. Box 17813				05 02 2012				
	,	State	Zip Code		Trans	saction ID :	D127957		
	Richmond Purpose of Disbursement	VA	23226						
	Contributions for Federal Candidates			011	Amour	t of Each D	Disbursement	this Pe	eriod
	Candidate Name			Category/				2500.0	00
	Rep. Eric I. Cantor Office Sought: House Disbursen	ant For	2012	Туре		7	-	_550.0	
	Senate	Primary Other (spe	General						
	State: VA District: 07								
D	Full Name (Last, First, Middle Initial)				Data	f Diahuraan			
В.	Carmona for Arizona				Date C	f Disbursen		- Y - Y	/
	Mailing Address 1010 Vermont Avenue, NW Suite 814				06	21)12	
	Washington	State DC	Zip Code 20005		Tran	saction ID :	D134235		
	Purpose of Disbursement Contributions for Federal Candidates			011	Amount of Each Disbursement this Period			eriod	
	Candidate Name			Category/				5000	00
	Dr Richard Carmona			Type			7	5000.0	00
	Office Sought: House Disbursen Senate	nent For: Primary	2012 General						
		Other (spe							
_	State: AZ District:		• •						
_	Full Name (Last, First, Middle Initial)					(D:-!-			
Ú.	Charles Boustany Jr MD For Congr	ess Ind	C			f Disbursen			
	Mailing Address PO Box 80126				06	21)12	
	,	State	Zip Code		Trans	saction ID :	D134219		
	Lafayette Purpose of Disbursement	LA	70598				D 107213		
	Contributions for Federal Candidates			011	Δmour	t of Each C	Disbursement	thic D	eriod
	Candidate Name			Category/	Amoul	. OI LAUII L	, SDUI SCIIICIII	-	
	Mr. Charles Boustany			Type		-		1500.0	JU
	President	nent For: Primary Other (spe	General						
	State: LA District: 07								
s	SUBTOTAL of Disbursements This Page (optional)			<u> </u>		- ,	,	9000.0	00
1	OTAL This Period (last page this line number only)			·····					

S	CHEDULE B (FEC Form 3X)	FOR LINE			NUMBER: PAGE 171 OF 227				
IT	EMIZED DISBURSEMENTS		parate schedule(s) a category of the	(check only	one)			00	
			Summary Page	21b	22 28a	X 23 28b		26 30b	
ΓΔ,	ny information copied from such Reports and Staten	l nente mav	not be sold or us						
	for commercial purposes, other than using the nam							_	
\setminus	NAME OF COMMITTEE (In Full)								
$ \rangle$	National Emergency Medicine Polit	ical Ac	tion Commit	tee					
<u></u>	Full Name (Last, First, Middle Initial)								
A.	Charles Boustany Jr MD For Cong	ress Ind	C		Date o	f Disburser	nent		
					04 25 / 2012				
	Mailing Address PO Box 80126								
	City	State	Zip Code						
	Lafayette	LA	70598		Trans	action ID :	D127758		
	Purpose of Disbursement Contributions for Federal Canddiates				Amoun	t of Each [Disbursement this Period	٨	
	Candidate Name				Amoun	i oi Eacii i	Disbursement this Penot	u	
	Mr. Charles Boustany			Category/ Type			1000.00		
		nent For:	2012						
	Senate	Primary	General						
	State: LA District: 07	Other (spe	ecity) 🔻						
_	Full Name (Last, First, Middle Initial)								
В.	CHC Bold PAC				Date of	f Disburser	ment		
					M = M	/ D I	D / Y Y Y Y Y		
	Mailing Address 1831 Bay Street, SE				06	21	2012		
	•	State	Zip Code		Trans	action ID:	: D134222		
	Washington DC 20003 Purpose of Disbursement								
	Contributions for Federal PACs/Committees			011	Amount of Each Disbursement this Period			d	
	Candidate Name			Category/				П	
	000			Туре			2000.00	_	
		nent For: Primary	2012 General						
		Other (spe							
	State: District:		Annual contribu	tion					
_	Full Name (Last, First, Middle Initial)								
C.	Committee to Elect Michelle Lujan	Grisha	m		Date of	f Disburser			
	Mailing Address 2015 Dietz Place, NW				06	21			
	•	State	Zip Code		Trans	action ID :	: D134232		
	Albuquerque Purpose of Disbursement	NM	87107						
	Contributions for Federal Candidates			011	Amoun	t of Each [Disbursement this Period	d	
	Candidate Name			Category/					
	0/5			Type			2500.00		
		nent For: Primary	2012 General						
	President	Other (spe							
	State: NM District: 01	\ \ I	3 / ₹						
Г	<u> </u>							\equiv	
5	SUBTOTAL of Disbursements This Page (optional)						5500.00		
Γ.	OTAL This David (last name this line words							\neg	
1 1	'OTAL This Period (last page this line number only)			·····		-			

SCHEDULE B (FEC Form 3X)			NE NUMBER: PAGE 172 OF 227				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b 27	22 X 23 24 25 27 28a 28b 28c 29 3				
Any information copied from such Reports and State	ments may not be sold or use						
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
National Emergency Medicine Poli	tical Action Committe	ee					
Full Name (Last, First, Middle Initial)							
A. Committee to Elect Michelle Lujan	Grisham		Date of Disbursement				
Mailing Address 2015 Dietz Place, NW			04 25 2012				
City	State Zip Code		Transaction ID : D127767				
Albuquerque	NM 87107		Transaction ib . D121101				
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	2500.00				
000		Туре	2300.00				
Office Sought: House Disburse	ment For: 2012 Primary General						
President	Other (specify)						
State: NM District: 01							
Full Name (Last, First, Middle Initial)							
B. Congressman Waxman Campaigr	Committee		Date of Disbursement				
Moiling Address Coop Wileting Divid M4040			M M / D D / Y Y Y Y Y				
Mailing Address 6380 Wilshire Blvd. #1612			05 24 2012				
City	State Zip Code		Transaction ID : D129100				
Los Angeles Purpose of Disbursement	CA 90048						
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	4500.00				
Rep. Henry A. Waxman		Type	1500.00				
Office Sought: House Disburse Senate	ment For: 2012						
President	Primary						
State: CA District: 30	• · · · · · · · · · · · · · · · · · · ·						
Full Name (Last, First, Middle Initial)							
C. DEMOCRATS UNITED TO CHANGE A	ND HOPE PAC (DUTC	H PAC)	Date of Disbursement				
Mailing Address 400.0 Operital Officer OW			04 25 2012				
Mailing Address 499 S. Capitol Street, SW Suite 404			04 25 2012				
City	State Zip Code		Transaction ID : D127772				
Washington	DC 20003		Transaction ib . Dizirrz				
Purpose of Disbursement Contributions for Federal PACs/Committees		011					
Candidate Name			Amount of Each Disbursement this Period				
		Category/ Type	1000.00				
Office Sought: House Disburse	ment For: 2012						
Senate	Primary General						
President	Other (specify)						
State: District:	Annual contributi	ori					
SUBTOTAL of Disbursements This Page (optional)			5000.00				
OODIGIAL OF DISDUISEMENTS THIS Page (optional)		<u> </u>					
TOTAL This Period (last page this line number only)		1				

	CHEDULE B (FEC Form 3X)	llee sens	arate schedule(s)	FOR LINE		L	PAGE 173 OF 2	227
IT	EMIZED DISBURSEMENTS	for each	category of the	(check only 21b	one)	23	24 25	26
		Detailed :	Summary Page	27	28a		28c 29	30b
	ny information copied from such Reports and Statem							
OI	r for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	ie and addr	ess of any politica	ai committee to	SOIICIT CONTRI	butions from	such committee.	
/	National Emergency Medicine Polit	ical Acti	on Committe	ee				
_	Full Name (Last, First, Middle Initial)				Data of D	:		
Α.	Denny Heck for Congress				Date of D	isbursement	Y	
	Mailing Address PO Box 235					28	2012	
	•	State	Zip Code		Transaction ID : D134510			
	Olympia Purpose of Disbursement	WA	98507-0235		mansac		4010	
	Contribution for Federal Candidates				Amount of	f Each Disbu	rsement this Period	d
	Candidate Name			Category/ Type		4	2500.00	
		nent For: 2	2012			,		
	Senate President	Primary Other (spec	General					
	State: WA District: 10	Other (spec	Siry) ▼					
	Full Name (Last, First, Middle Initial)							
В.	Dewhurst for Texas					isbursement		
	Mailing Address P.O. Box 2667				06	21	2012	
	City	State	Zip Code		Transac	tion ID : D13	./231	
	· ·						7201	
	Austin	TX	78768					
		TX	78768	011	Amount of	f Each Disbu	rsement this Period	d
	Austin Purpose of Disbursement	TX	78768	011 Category/ Type	Amount of	f Each Disbu	rsement this Period	d
	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Disbursem	nent For: 2	2012	Category/	Amount of	f Each Disbu		d
	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Disbursem Senate	nent For: 2 Primary	2012 General	Category/	Amount of	f Each Disbu		d
	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Disbursem Senate	nent For: 2	2012 General	Category/	Amount of	f Each Disbu		d
_	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial)	nent For: 2 Primary	2012 General cify) ▼	Category/				nd
<u> </u>	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District:	nent For: 2 Primary	2012 General cify)	Category/	Date of D	isbursement	5000.00	d
<u> </u>	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial)	nent For: 2 Primary	2012 General cify)	Category/				od
— С.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667	nent For: 2 Primary Other (spec	2012 ☐ General Sify) ▼ Runoff Zip Code	Category/	Date of D	isbursement	5000.00 Y Y Y Y 2012	od
C.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City Saustin	nent For: 2 Primary Other (spec	2012 ☐ General cify) ▼ Runoff	Category/	Date of D	isbursement	5000.00 Y Y Y Y 2012	od .
С.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667	nent For: 2 Primary Other (spec	2012 ☐ General Sify) ▼ Runoff Zip Code	Category/	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y 2012	
С.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City Saustin Purpose of Disbursement	nent For: 2 Primary Other (spec	2012 ☐ General Sify) ▼ Runoff Zip Code	Category/ Type 010 Category/	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y Y Y Y 2012 7872 rsement this Period	
C.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name	nent For: 2 Primary Other (spec	Zip Code 78768	Category/ Type	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y 2012 7872	
C.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City SAustin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Disbursement	nent For: 2 Primary Other (spec	Zip Code 78768	Category/ Type 010 Category/	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y Y Y Y 2012 7872 rsement this Period	
C.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City Sanate Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President Disbursement Candidates Candidate Name	nent For: 2 Primary Other (spec	2012	Category/ Type 010 Category/	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y Y Y Y 2012 7872 rsement this Period	
	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City SAustin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate	nent For: 2 Primary Other (spec	2012	Category/ Type 010 Category/	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y Y Y Y 2012 7872 rsement this Period	
C.	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City Sanate Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President Disbursement Candidates Candidate Name	nent For: 2 Primary Other (spec	Zip Code 78768 Zip Code 78768	Category/ Type 010 Category/ Type	Date of D	isbursement 27 tion ID : D12	5000.00 Y Y Y Y Y Y Y 2012 7872 rsement this Period	
	Austin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: Full Name (Last, First, Middle Initial) Dewhurst for Texas Mailing Address P.O. Box 2667 City Saustin Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President State: TX District: State: TX District:	nent For: 2 Primary Other (spec	General Sify) ▼ Runoff Zip Code 78768	Category/ Type 010 Category/ Type	Date of D	isbursement 27 tion ID : D12	7872 rsement this Period 5000.00	

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 174 OF 227				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30				
Any information conied from such Departs and Chater	anto mou not be cold or						
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
National Emergency Medicine Polit	ical Action Committ	ee					
Full Name (Last, First, Middle Initial)			Date of Dishursement				
A. Diana Degette For Congress Inc.			Date of Disbursement				
Mailing Address P.O. Box 61337			06 27 2012				
,	State Zip Code		Transaction ID : D134482				
	CO 80206		Hallsaction ib . D134402				
Purpose of Disbursement VOID CK 7921 6/27/12			Amount of Each Disbursement this Period				
Candidate Name		Category/	-1000.00				
Rep. Diana DeGette Office Sought:	aont For: 0040	Туре	1000.00				
Senate President	nent For: 2012 Primary General Other (specify)		VOID CK 7921 6/27/12				
State: CO District: 01							
Full Name (Last, First, Middle Initial) B. Diane Black for Congress			Date of Disbursement				
B. Diane Black for Congress			M M / D D / Y Y Y Y				
Mailing Address PO Box 1437			06 21 2012				
City S Gallatin Purpose of Disbursement	State Zip Code TN 37066-1437		Transaction ID : D134210				
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period				
Candidate Name		Category/					
Diane Black		Type	2500.00				
Senate	nent For: 2012 Primary						
Full Name (Last, First, Middle Initial) C- DIRIGO PAC			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address PO Box 1355			05 02 2012				
,	State Zip Code VA 22313		Transaction ID : D127964				
Purpose of Disbursement	22010						
	Contributions for Federal PACs/Committees						
Candidate Name		Category/ Type	5000.00				
Office Sought: House Disbursen	nent For: 2012		7				
	Primary General						
	Other (specify)	ion					
State: District:	Annual contribut	ion					
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	6500.00				
TOTAL This Period (last page this line number only)							

S	CHEDULE B (FEC Form 3X)	EOP LII			R LINE NUMBER: PAGE 175 OF 227							
ΙT	EMIZED DISBURSEMENTS	Use separate schedule(s)			only	-						
•		for each category of the Detailed Summary Page			21b	22	بنا	23	24		25	26
_					27	28a		28b	28	С	29	30b
	ny information copied from such Reports and Staten											
or	for commercial purposes, other than using the name	ne and address of any politic	cai con	nmitt	ee to	SOIICIT CO	ntribl	utions	from s	ucn c	ommi	itee.
	NAME OF COMMITTEE (In Full)	iaal Aatian Canansitt										
/	National Emergency Medicine Polit	icai Action Commit	.ee									
_	Full Name (Last, First, Middle Initial)											
Α.	DOC PAC					Date o	f Dis	burse	ment			
						M = M	/	D			Y	Y
	Mailing Address 337 S. Milledge Avenue Ste. 101					04	4	1	1	_ 2	2012	
	City	State Zip Code										
	Athens	GA 30605				Trans	sactio	on ID	: D127	347		
	Purpose of Disbursement			-	\neg							
	Contributions for Federal PACs/Committees		0)11		Amoun	t of I	Each	Disburs	emen	t this	Period
	Candidate Name		Cate		y/						250	0.00
	Office Sought: House Disburser	ant For 2010	Ty	ype				7	- 7			0.00
	Senate Disburser	nent For: 2012 Primary General										
		Other (specify) ▼										
	State: District:	annual PAC cont	ribut									
	Full Name (Last, First, Middle Initial)											
В.	Duncan for Congress					Date o	f Dis	burse	ment			
						M = M	/	D			Y	Y
	Mailing Address PO Box 732					06		1:	3	2	2012	
	City	State Zip Code										
	Clinton	SC 29325				Trans	sacti	on ID	: D133	894		
	Purpose of Disbursement			-	_	-						
	Contributions for Federal Candidates	011				Amount of Each Disbursement this Period			Period			
	Candidate Name		Cate		y/						200	0.00
	Office Sought:	cont For: 0040	Ту	ype				,	7	_		
	Senate Dispulser	nent For: 2012 Primary X General										
	President	Other (specify)										
	State: SC District: 03	· · · · · · · · · · · · · · · · · · ·										
	Full Name (Last, First, Middle Initial)											
C.	DUTCH RUPPERSBERGER FOR	CONGRESS				Date o	f Dis	burse	ment			
						M M	/	D			Y	Y
	Mailing Address 499 S Capitol St SW Ste 404					06	4	06	o l	_ 2	012	
		State Zip Code										
	•	DC 20003-4004				Trans	sacti	on ID	: D133	724		
	Purpose of Disbursement Contributions for Federal Candidates			-	\neg							
			0	11		Amoun	t of I	Each	Disburs	emen	t this	Period
	Candidate Name		Cate		y/						100	0.00
	Rep. C.A. Ruppersberger Office Sought: House Disburser	nent For: 2012	17	ype				7				
	Senate Disburser	Primary General										
	President	Other (specify) ▼										
	State: MD District: 02	· · · · · · · · · · · · · · · · · · ·										
Г							-	-	-	-	-	
8	SUBTOTAL of Disbursements This Page (optional)				•			,			550	0.00
Г								-				
ľ	'OTAL This Period (last page this line number only)							7				

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 176 OF 227				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) FOR LINE (check only	NOMBER:				
THE DISCOUNT OF THE PROPERTY O	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26				
		27	28a 28b 28c 29 30l				
Any information copied from such Reports and State	,	, , ,	1 1				
or for commercial purposes, other than using the na	ame and address of any polit	ical committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
$ \; angle$ National Emergency Medicine Po	litical Action Commi	ttee					
Full Name (Last, First, Middle Initial)		1					
A. Eye of the Tiger PAC			Date of Disbursement				
Lyc of the riger 1710			M M / D D / Y Y Y Y				
Mailing Address 213 Ashby Street			06 06 2012				
			Transaction ID : D133720				
City	State Zip Code VA 22305						
Alexandria Purpose of Disbursement	VA 22305						
Contributions for Federal PACs/Committees		011	Amount of Each Disbursement this Period				
Candidate Name		Cotogony					
		Category/ Type	1000.00				
Office Sought: House Disburs	ement For: 2012						
Senate	Primary General						
President	Other (specify) ▼						
State: District:	Annual contrib	ution					
Full Name (Last, First, Middle Initial)	Date of Disbursement						
B. Fitzpatrick For Congress							
Mailing Address P.O. Box 185			05 02 2012				
Maining / Ida 1000 1 . O. Box 100			00 02 2012				
City	State Zip Code		Transaction ID : D127969				
Langhorne	PA 19047		Transaction ib . D127303				
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Dishursoment this Pariod				
Candidate Name			Amount of Each Disbursement this Period				
Mr. Michael Fitzpatrick		Category/ Type	2500.00				
	ement For: 2012	Турс	, , , , , , , , , , , , , , , , , , , ,				
Senate	Primary X General						
President	Other (specify)						
State: PA District: 08							
Full Name (Last, First, Middle Initial)							
C. Friends Of Bennie Thompson			Date of Disbursement				
Matthew Address and Address			M M / D D / Y Y Y Y				
Mailing Address 236 Massachusetts Ave NE Ste 603			06 13 2012				
City	State Zip Code						
Washington	DC 20002-4971		Transaction ID : D133896				
Purpose of Disbursement Contributions for Federal Candidates							
		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Rep. Bennie G. Thompson	oment For: 0040	Туре	1000.00				
Office Sought: House Disburs Senate	ement For: 2012 Primary General						
President	Other (specify)						
State: MS District: 02	Strict (opcomy)						
2							
SUBTOTAL of Disbursements This Page (optional)			4500.00				
22_132 3. 2.02233							
TOTAL This Period (last page this line number on	y)						

SCHI	EDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 177 OF 227				
ITEM	IZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	y one)				
		Detailed Summary Page	21b	22 X 23	24 25 26 28c 29 30b			
			27	28a 28b				
	formation copied from such Reports and Staten commercial purposes, other than using the nam							
NAM	ME OF COMMITTEE (In Full)							
/	ational Emergency Medicine Polit	tical Action Commi	ttee					
	Name (Last, First, Middle Initial)			D (D) .				
A. Fr	iends Of Bennie Thompson			Date of Disbursement				
Mai	ling Address 236 Massachusetts Ave NE Ste 603			06 27 2012				
City		State Zip Code						
	shington	DC 20002-4971		Transaction ID : D134471				
	pose of Disbursement DID CK 7439 6/27/12			Amount of Each Disb	ursement this Period			
Can	didate Name		Category/		0500.00			
	ep. Bennie G. Thompson		Type	7	-2500.00			
Offic		ment For: 2010						
	Senate President	Other (specify) — General		VOID CK 7439 6/27/12	2			
Stat		Other (specify) ▼						
	Name (Last, First, Middle Initial)							
	iends Of Bill Posey			Date of Disbursemen	t			
				M = M / D = D	/ Y Y Y Y Y			
Mai	ling Address 1824 South Fiske Boulevard			06 13 2012				
City	ckledge	State Zip Code FL 32955		Transaction ID : D1	33888			
	pose of Disbursement ontributions for Federal Candidates		011	Amount of Each Disb	ursement this Period			
Can	ididate Name		Category/					
Mı	r. Bill Posey		Type		2000.00			
Offic		nent For: 2012	1					
		Primary General						
Stat	President Dictrict: 45	Other (specify) ▼						
_	Name (Last, First, Middle Initial) RIENDS OF GLENN THOMPSON	NI		Date of Disbursemen	t			
- 11	CIEINDO OF GEEININ FILOMI GOI	•		M M / D D	/ Y Y Y Y			
Mai	ling Address P.O. Box 1112			06 21	2012			
City		State Zip Code		Transaction ID - D4	24224			
	te College	PA 16804		Transaction ID : D1	J444 I			
	pose of Disbursement ntributions for Federal Candidates		044					
	ididate Name		011	Amount of Each Disb	ursement this Period			
	lenn Thompson		Category/ Type		2500.00			
		nent For: 2012	Турс					
	Senate	Primary Seneral						
	President	Other (specify) ▼						
Stat	te: PA District: 05							
					2000.22			
SUBT	TOTAL of Disbursements This Page (optional)		······		2000.00			
TOTA	I This Povind (lost need this line number at 1)							
LIUIA	L This Period (last page this line number only)	•••••						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) National Emergency Medicine Pol			Solicit Contributions from Such Committee.			
Full Name (Last, First, Middle Initial)						
A. Friends Of Joe Pitts			Date of Disbursement			
Mailing Address PO Box 775			04 11 2012			
City	State Zip Code		Transaction ID : D127345			
Unionville	PA 19375		Transaction ID . D127343			
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Rep. Joseph R. Pitts		Type	1500.00			
Office Sought: House Disburse Senate President	ment For: 2012 Primary					
State: PA District: 16						
Full Name (Last, First, Middle Initial) B. Friends of Nan Hayworth Mailing Address 1006 Pendleton Street			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Alexandria	State Zip Code VA 22314		Transaction ID : D134220			
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period			
Contributions for a cacial Canadates		011	Allocate of Each Biobardonical time Forest			
Candidate Name		Category/				
		Category/ Type	1500.00			
Candidate Name NAN HAYWORTH Office Sought: House Disburse	ment For: 2012 Primary General Other (specify)		1500.00			
Candidate Name NAN HAYWORTH Office Sought: House Disburse	Primary General		1500.00			
Candidate Name NAN HAYWORTH Office Sought: House Senate President State: NY District: 19	Primary General		Date of Disbursement			
Candidate Name NAN HAYWORTH Office Sought: House Disburse	Primary General		Date of Disbursement			
Candidate Name NAN HAYWORTH Office Sought: Senate President State: NY District: 19 Full Name (Last, First, Middle Initial) Friends of Scott DesJarlais	Other (specify) ▼ State Zip Code		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Candidate Name NAN HAYWORTH Office Sought: State: NY District: 19 Full Name (Last, First, Middle Initial) C. Friends of Scott DesJarlais Mailing Address 3697 Main Street City Jasper	Primary General Other (specify) ▼		Date of Disbursement			
Candidate Name NAN HAYWORTH Office Sought: Senate President State: NY District: 19 Full Name (Last, First, Middle Initial) Friends of Scott DesJarlais Mailing Address 3697 Main Street City	Other (specify) ▼ State Zip Code		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Candidate Name NAN HAYWORTH Office Sought: State: NY District: 19 Full Name (Last, First, Middle Initial) C. Friends of Scott DesJarlais Mailing Address 3697 Main Street City Jasper Purpose of Disbursement	Other (specify) ▼ State Zip Code	Type 011 Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Candidate Name NAN HAYWORTH Office Sought: Senate President President State: NY District: 19 Full Name (Last, First, Middle Initial) C. Friends of Scott DesJarlais Mailing Address 3697 Main Street City Jasper Purpose of Disbursement Contributions for Federal Candidates Candidate Name	Other (specify) ▼ State Zip Code	Type O11	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Candidate Name NAN HAYWORTH Office Sought: Senate President State: NY District: 19 Full Name (Last, First, Middle Initial) C. Friends of Scott DesJarlais Mailing Address 3697 Main Street City Jasper Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President Disburse	Other (specify) State Zip Code TN 37347 ment For: 2012 Primary General	Type 011 Category/	Date of Disbursement M M M / P D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Candidate Name NAN HAYWORTH Office Sought: Senate President State: NY District: 19 Full Name (Last, First, Middle Initial) C. Friends of Scott DesJarlais Mailing Address 3697 Main Street City Jasper Purpose of Disbursement Contributions for Federal Candidates Candidate Name Office Sought: House Senate President Disburse	Other (specify) General Other (specify) State Zip Code TN 37347 ment For: 2012 Primary General Other (specify) Other (specify)	O11 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

SCHEDULE B (FEC Form 3X)		FOD : 1115	NUMBER: PAGE 179 OF 227				
ITEMIZED DISBURSEMENTS	Use separate schedule(s	FOR LINE (check only	INOMBER.				
II LIVIIZED DISBURSEIVIEN IS	for each category of the	21b	22 🔀 23 🗆 24 🗆 25 🗀 26				
	Detailed Summary Page	27	28a 28b 28c 29 30				
Any information copied from such Reports and State	ments may not be sold or u	sed by any perso	on for the purpose of soliciting contributions				
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
National Emergency Medicine Pol	itical Action Commit	tee					
/							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. Friends of Scott DesJarlais	Friends of Scott Desjarials						
Mailing Address 3697 Main Street			05 09 2012				
maning ratios over main officer			30 30 20,2				
City	State Zip Code		Transaction ID - D120126				
Jasper	TN 37347		Transaction ID: D128126				
Purpose of Disbursement Contributions for Federal Candidates		011					
		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Office Sought:	ment For: 2012	Туре	7				
Senate Sought.	Primary X General						
President	Other (specify) ▼						
State: TN District: 04	(1)						
Full Name (Last, First, Middle Initial)							
B. Gillibrand for Senate			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 236 Massachusetts Ave., NE			05 09 2012				
Suite 110							
City Washington	State Zip Code DC 20002		Transaction ID : D128119				
Purpose of Disbursement	20002						
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period				
Candidate Name		Category/					
		Type	5000.00				
Office Sought: House Disburse	ment For: 2012						
Senate	Primary General						
President	Other (specify) ▼						
State: NY District: 00							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
C. Guthrie For Congress							
Mailing Address PO Box 9639			05 02 2012				
3							
City	State Zip Code		Transaction ID : D127970				
Bowling Green	KY 42102		Transaction is . 5127570				
Purpose of Disbursement Contributions for Federal Candidates		011					
Candidate Name		011	Amount of Each Disbursement this Period				
Mr. Steven Guthrie		Category/ Type	2500.00				
	ment For: 2012	Type	7				
Senate	Primary X General						
President	Other (specify) ▼						
State: KY District: 02	·						
,							
SUBTOTAL of Disbursements This Page (optional).			8500.00				
TOTAL This Period (last page this line number only)						

S	CHEDULE B (FEC Form 3X)	FOR LINE			INE NUMBER: PAGE 180 OF 227				
IT	EMIZED DISBURSEMENTS	for each	parate schedule(s) category of the	(check onl	y one)	X 23	24 25	<u>26</u>	
		Detailed	Summary Page	27	28a	28b	28c 29	30b	
Ar	ny information copied from such Reports and Staten	ı nents may	not be sold or us	ed by any pers	son for the	purpose of	soliciting contribut	ions	
	for commercial purposes, other than using the name								
\setminus	NAME OF COMMITTEE (In Full)								
	National Emergency Medicine Polit	ical Ac	tion Committ	ee					
_	Full Name (Last, First, Middle Initial)								
Α.	Guthrie For Congress				Date o	f Disbursem			
	Mailing Address PO Box 9639				04	11		Y	
	City	State	Zip Code		Transaction ID : D127342				
	Bowling Green	KY	42102		Irans	saction ID :	D12/342		
	Purpose of Disbursement Contributions for Federal Candidates			011	Amour	t of Each D	Disbursement this F	Period	
	Candidate Name			Category/			3000	00	
	Mr. Steven Guthrie Office Sought:			Туре		7	3000	.00	
		Primary	General						
		Other (spe	ecify) ▼						
_	State: KY District: 02 Full Name (Last, First, Middle Initial)								
В.					Date of	f Disbursem	nent		
					M = M	/ D D	/ Y Y Y Y	Υ	
	Mailing Address PO Box 9639				05	24	2012		
	City S Bowling Green	State KY	Zip Code 42102		Tran	saction ID :	D129108		
	Purpose of Disbursement Contributions for Federal Candidates			011	Amour	t of Each D	Disbursement this F	Pariod	
	Candidate Name				Amour	t or Lacir L	ASSOCIACITE UNIS 1	Cilou	
	Mr. Steven Guthrie			Category/ Type			2500	.00	
	Office Sought: House Disbursen	nent For:							
		Primary	General						
	President State: KY District: 02	Other (spe	ecity) 🔻						
_	Full Name (Last, First, Middle Initial)								
C.	Hoyer For Congress				Date o	f Disbursem	nent		
	Mallian Address 1991 Not 1992 207				M	/ D D		Υ	
	Mailing Address 4201 Northview Dr, Ste 307				06	13	2012		
	•	State	Zip Code		Tran	saction ID :	D133886		
	Bowie Purpose of Disbursement	MD	20716		-				
	Contributions for Federal Candidates			011	Amour	t of Each D	Disbursement this F	Period	
	Candidate Name			Category/	, uniodi	t or Edon E			
	Rep. Steny H. Hoyer			Type			2500.	.00	
		nent For: Primary Other (spe	X General						
	State: MD District: 05	(56	<i>37</i> , ▼						
Г								-	
s	SUBTOTAL of Disbursements This Page (optional)			·····•	<u> </u>	-	8000.	.00	
Т	OTAL This Period (last page this line number only)			·····					

S	CHEDULE B (FEC Form 3X)	llos ser	FOR LINE NUMBER: PAGE 18					227
IT	EMIZED DISBURSEMENTS	for each	parate schedule(s) a category of the	(check only	y one) 22 💢 23 🗍 24 📄 25 🦵			7 26
		Detailed	Summary Page	27	28a	28b	28c 29	30b
	ny information copied from such Reports and Statem							3
or	for commercial purposes, other than using the name	e and add	aress of any politic	ai committee to	o solicit co	ntributions f	rrom such committee.	
$ \rangle$	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Ac	tion Committ	ee				
\angle	G ,							
Α.	Full Name (Last, First, Middle Initial) Huffman for Congress 2012				Date o	f Disbursem	nent	
					M			
	Mailing Address P.O. BOX 151563				06	21	2012	
	City							
	SAN RAFAEL	CA	94915		Trans	saction ID:	D134230	
	Purpose of Disbursement Contributions for Federal Candidates			011	Amoun	t of Each D	Disbursement this Perio	od
	Candidate Name			Category/	-		0500.00	\neg
	JARED MR. HUFFMAN Office Sought: House Disbursen		0040	Туре		- 7	2500.00	
		nent For: Primary	2012 General					
	President	Other (spe						
	State: CA District: 06							
В.	Full Name (Last, First, Middle Initial) IMPACT	Date o	f Disbursem	nent				
					M = M	/ D D		
	Mailing Address 220 I St NE Ste 250				04	25	2012	
	City S Washington	State DC	Zip Code 20002-4693		Trans	saction ID :	D127761	
	Purpose of Disbursement	-	23302 7000		-			
	Contributions for Federal PACs/Committees Candidate Name	011			Amount of Each Disbursement this Pe			od
	Candidate Name			Category/ Type			2500.00	
	Office Sought: House Disbursen							
		Primary Other (spe	General					
	State: District:	J.1.01 (3pt	Annual contribut	ion				
_	Full Name (Last, First, Middle Initial)				_			
C.	JOEPAC					f Disbursem		
	Mailing Address 601 S Broad Street				05	02		
	City	State	Zip Code					
	Lititz	PA	17543		Trans	saction ID:	D127971	
	Purpose of Disbursement Contributions for Federal PACs/Committees			011				
	Candidate Name			Category/	Amoun	t of Each D	Disbursement this Perio	od
				Type			2500.00	
	Office Sought: House Disbursen Senate	nent For: Primary	2012 General					
		Other (spe						
	State: District:		Annual contribut	ion				
							7500.00	
Ls	SUBTOTAL of Disbursements This Page (optional)			······	-		7300.00	_
Т	OTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 182 C				
TEMIZED DISBURSEMENTS	Use separate schedul for each category of t	the Concor only				
	Detailed Summary Pa		22 X 23 28b	24 25 26 28c 29 30b		
Any information copied from such Reports and State	monte may not be cold a					
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
> National Emergency Medicine Pol	itical Action Comr	mittee				
Full Name (Last, First, Middle Initial)						
A. John D. Dingell For Congress Cor	nmittoo		Date of Disbursemer	nt		
John D. Dingen of Congress Con	IIIIIIIII		M M / D D	/ Y Y Y Y		
Mailing Address PO Box 75214			05 02	2012		
011	Otata 7'- Oada					
City Washington	State Zip Code DC 20013		Transaction ID : D1	127972		
Purpose of Disbursement	20010					
Contributions for Federal Candidates		011	Amount of Each Disk	oursement this Period		
Candidate Name		Category/		2500.00		
Rep. John D. Dingell Office Sought: House Disburse	ment For: 2012	Туре		1000.00		
Senate Disburse	Primary X Gener	ral				
President	Other (specify) ▼					
State: MI District: 15						
Full Name (Last, First, Middle Initial)						
^{B.} John D. Dingell For Congress Cor	nmittee		Date of Disbursemer			
Mailing Address PO Box 75214			05 09	2012		
City	State Zip Code		Transaction ID : D	128133		
Washington	State Zip Code DC 20013		Transaction ID : D	128133		
•		011		128133 pursement this Period		
Washington Purpose of Disbursement				oursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell	DC 20013	011 Category/ Type				
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Disburse	DC 20013 ment For: 2012	Category/ Type		oursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Disburse	DC 20013 ment For: 2012 Primary Gener	Category/ Type		oursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Disburse	DC 20013 ment For: 2012	Category/ Type		oursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Disburse	DC 20013 ment For: 2012 Primary Gener	Category/ Type		oursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15	DC 20013 ment For: 2012 Primary Gener	Category/ Type		pursement this Period 2500.00		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund	DC 20013 ment For: 2012 Primary Gener	Category/ Type	Amount of Each Disk	2500.00		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial)	DC 20013 ment For: 2012 Primary Gener	Category/ Type	Amount of Each Dist	2500.00		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund	DC 20013 ment For: 2012 Primary Gener	Category/ Type	Date of Disbursement	2500.00 2500.00		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville	ment For: 2012 Primary Gener Other (specify)	Category/ Type	Amount of Each Disk	2500.00 2500.00		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City	ment For: 2012 Primary Gener Other (specify) State Zip Code	Category/ Type	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 at 2012		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement	ment For: 2012 Primary Gener Other (specify) State Zip Code	Category/ Type	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025	Category/ Type	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 at 2012		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name Office Sought: House Disburse	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025	Category/ Type al O11 Category/ Type	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 nt 2012 128121 pursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name Office Sought: House Senate Disburse Senate	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025 ment For: 2012 Primary Gener	Category/ Type al O11 Category/ Type	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 nt 2012 128121 pursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name Office Sought: House Disburse	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025 ment For: 2012 Primary Gener Other (specify) Other (specify) Other (specify) Other (specify)	Category/ Type al O11 Category/ Type ral	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 nt 2012 128121 pursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name Office Sought: House Senate President Funds Disburse Senate President	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025 ment For: 2012 Primary Gener	Category/ Type al O11 Category/ Type ral	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 nt 2012 128121 pursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name Office Sought: House Senate President Funds Disburse Senate President	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025 ment For: 2012 Primary Gener Other (specify) Annual cont	Category/ Type al O11 Category/ Type ral tribtuion	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 nt 2012 128121 pursement this Period		
Washington Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. John D. Dingell Office Sought: House Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) C. John S Fund Mailing Address PO Box 853 City Edwardsville Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name Office Sought: House Senate President State: District:	ment For: 2012 Primary Gener Other (specify) State Zip Code IL 62025 ment For: 2012 Primary Gener Other (specify) Annual cont	Category/ Type al O11 Category/ Type ral tribtuion	Date of Disbursement 05 / 09 Transaction ID : Dr	2500.00 2500.00 nt 2012 128121 Dursement this Period 5000.00		

SCHEDULE B (FEC Form 3X)	Use separate schedule((a) I	FOR LINE NUMBER: PAGE 183 OF 227				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	e Concor only	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30				
Any information copied from such Reports and Stater or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	•		The state of the s				
Full Name (Last, First, Middle Initial)							
A. Jotte for Congress			Date of Disbursement				
Mailing Address 120 Orchard Ave			05 24 2012				
Saint Louis	State Zip Code MO 63119-2510		Transaction ID : D129110				
Purpose of Disbursement Contributions for Federal Candidates		010	Amount of Each Disbursement this Period				
Candidate Name		Category/	2500.00				
	ment For: 2012 Primary General Other (specify) ▼	Туре					
Full Name (Last, First, Middle Initial)			D				
3. Kinzinger for Congress			Date of Disbursement				
Mailing Address 104 Hume Avenue			06 06 2012				
Alexandria	State Zip Code VA 22301		Transaction ID : D133719				
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	1000.00				
Senate	ment For: 2012 Primary ∑ General Other (specify) ▼						
Full Name (Last, First, Middle Initial) C. Kirk For Senate			Date of Disbursement				
Mailing Address P.O. BOX 8			05 09 2012				
WINNETKA	State Zip Code IL 60093		Transaction ID : D128131				
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period				
Candidate Name Rep. MARK STEVEN Steven KIR	K	Category/ Type	1000.00				
	ment For: 2016 Primary General Other (specify)						
State: IL District: 00		I					

Any	EMIZED DISBURSEMENTS	Use separate schedule(for each category of the Detailed Summary Page	21h	· ·
		, ,	27	22 X 23 24 25 26 28a 28b 28c 29 30b
	y information copied from such Reports and Statem	nents may not be sold or		
\vdash	for commercial purposes, other than using the nam			
I \	NAME OF COMMITTEE (In Full)			
	National Emergency Medicine Polit	ical Action Comm	ittee	
	Full Name (Last, First, Middle Initial)			
A.	Kurt Schrader For Congress			Date of Disbursement
	Mailing Address 205 N Main St.			06 27 2012
	City	State Zip Code		Transaction ID : D134472
	oregen only	OR 97045		Transaction ID: D134472
	Purpose of Disbursement VOID CK 7524 6/27/12			Amount of Each Disbursement this Period
	Candidate Name		Category/	-2500.00
	Mr. Kurt Schrader Office Sought: House Disbursem	aont For: 2042	Type	-2300.00
,	Senate President	nent For: 2010 Primary		VOID CK 7524 6/27/12
	State: OR District: 05			
	Full Name (Last, First, Middle Initial)			Data of Dichuraconant
О.	LANCE FOR CONGRESS			Date of Disbursement
	Mailing Address 370 Tall Tree Ct			04 11 2012
	Jackson	State Zip Code NJ 08527-3158		Transaction ID : D127339
	Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
-	Candidate Name		Category/	4000.00
	Rep. Leonard Lance		Type	1000.00
	Senate	nent For: 2012 Primary		
_	Full Name (Last, First, Middle Initial) LANCE FOR CONGRESS			Date of Disbursement
	Mailing Address 370 Tall Tree Ct		05 24 7 2012	
	,	State Zip Code NJ 08527-3158		Transaction ID : D129091
	Purpose of Disbursement Contributions for Federal Candidates		201	
	Candidate Name		011	Amount of Each Disbursement this Period
	Rep. Leonard Lance		Category/ Type	1000.00
	Office Sought: House Disbursem Senate President	nent For: 2012 Primary ∑ General Other (specify) ▼	Турс	
_	State: NJ District: 07			
\vdash	JBTOTAL of Disbursements This Page (optional) DTAL This Period (last page this line number only).		<u> </u>	-500.00

SCHEDULE B (FEC Form 3X)	FOR LINE NUMBER:			GE 185 OF 227	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	nly one)		
	Detailed Summary Page	21b	22 X 23 24 28a 28b 28c	25 26 29 30b	
Any information copied from such Reports and State	ments may not be sold or us				
or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
National Emergency Medicine Pol	itical Action Committ	ee			
Full Name (Last, First, Middle Initial)					
A. Landry for Louisiana		Date of Disbursement			
Mailing Address PO Box 13816		06 27	2012		
City	State Zip Code		Transaction ID - D42447	•	
New Iberia	LA 70562		Transaction ID : D13447	3	
Purpose of Disbursement VOID CK 7596 6/27/12			Amount of Each Disburser	nent this Period	
Candidate Name		Category/		-2500.00	
Office Sought:	ement For: 2010	Туре	7	1,,,,,,	
Senate President	Primary General Other (specify) ▼		VOID CK 7596 6/27/12		
State: LA District: 03	VOID CK 7596 6/2	27/12			
Full Name (Last, First, Middle Initial)			D . (D)		
B. Langevin For Congress			Date of Disbursement		
Mailing Address 181-A Knight St			05 02	2012	
City Warwick	State Zip Code RI 02886		Transaction ID : D12796	8	
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disburser	nent this Period	
Candidate Name		Category/		0500.00	
Mr. James Langevin		Type		2500.00	
Office Sought: House Disburse	ement For: 2012 Primary				
Full Name (Last, First, Middle Initial)			Date of Disbursement		
C. LATHAM FOR CONGRESS				YYYY	
Mailing Address 217 3rd St SE			05 09	2012	
City	State Zip Code		Transaction ID : D12812	8	
Washington Purpose of Disbursement	DC 20003-1904				
Contributions for Federal Candidates		012	Amount of Each Disburser	nent this Period	
Candidate Name		Category/	Table 5. Zadii Biobalooi		
Rep. Tom Latham		Type		1500.00	
Senate President	ement For: 2012 Primary General Other (specify)				
State: IA District: 04					
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	7	1500.00	
TOTAL This Period (last page this line number only	y)				

SCF	HEDULE B (FEC Form 3X)				DACE 186 OF 227				
	,				INE NUMBER: PAGE 186 OF 227				
	MIZED DISBURSEMENTS	for each categor		(check only					
		Detailed Summ	ary Page	27	22 X 23 24 25 26 28a 28b 28c 29 30b				
	information copied from such Reports and State								
or to	r commercial purposes, other than using the nar	ne and address o	f any political	committee to	solicit contributions from such committee.				
/ N	AME OF COMMITTEE (In Full)								
→ N	National Emergency Medicine Poli	tical Action (Committe	е					
/	<u> </u>								
F	ull Name (Last, First, Middle Initial)								
A. L	ATHAM FOR CONGRESS				Date of Disbursement				
_					M M / D D / Y Y Y Y				
M	ailing Address 217 3rd St SE				06 21 2012				
_		~·· -	0 1						
			Code		Transaction ID: D134212				
	/ashington urpose of Disbursement	DC 200	03-1904						
	Contributions for Federal Candidates			011	Amount of Food Dishurasment this Devied				
	andidate Name			011	Amount of Each Disbursement this Period				
				Category/	1000.00				
	Rep. Tom Latham			Type					
O		ment For: 2012	0						
	Senate	Primary X	General						
C	President	Other (specify)							
	tate: IA District: 04								
_	ull Name (Last, First, Middle Initial)								
в. [_atourette For Congress Committe	ee			Date of Disbursement				
_					M M / D D / Y Y Y Y				
M	ailing Address 320 Kenarden Dr.				06 13 2012				
_		O	0 1						
	,		Code		Transaction ID: D133884				
	lighland Hts. urpose of Disbursement	OH 441	43						
	Contributions for Federal Candidates			011	Amount of Each Disbursement this Period				
C	andidate Name				Amount of Each Disbursement this Feriod				
				Category/	2000.00				
	Rep. Steven C. LaTourette Flice Sought: Y House Disburse	ment For: 2012		Туре	7				
O	Senate		Conoral						
	President	Primary \(\sum_{\text{there}} \)	General						
C.		Other (specify)							
_	ull Name (Last, First, Middle Initial)				Data of Dishumannant				
C. L	EGPAC				Date of Disbursement				
_	In The control of the				M M / D D / Y Y Y Y				
IVI	ailing Address 38 Ivy Street				04 25 2012				
_	ity	State Zip	Code						
	/ashington	DC 200			Transaction ID : D127771				
	urpose of Disbursement								
	Contributions for Federal PACs/Committees			011	Amount of Each Disbursement this Period				
C	andidate Name			Cotogony	Amount of Each Disbursement this Feriod				
(Category/ Type	5000.00				
	Sen. Benjamin Cardin		1	2 F -					
	Sen. Benjamin Cardin ffice Sought: House Disburse	ment For: 2012							
		ment For: 2012 Primary	General						
	ffice Sought: House Disburse								
Ō	ffice Sought: House Disburse	Primary Other (specify)		n					
Ō	ffice Sought: House Disburse Senate President	Primary Other (specify)	•	n					
Si	ffice Sought: House Disburser Senate President MD District: 00	Primary Other (specify) Annu	▼ ual contribution		8000.00				
Si	ffice Sought: House Disburse Senate President	Primary Other (specify) Annu	▼ ual contribution		8000.00				

SC	HEDULE B (FEC Form 3X)		PAGE 187 OF 227			
ITE	MIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(CILCON OTTY			
		Detailed Summary Page	21b		24 25 26 30b	
			27			
	information copied from such Reports and Statem or commercial purposes, other than using the name					
I \	NAME OF COMMITTEE (In Full)					
\angle	National Emergency Medicine Polit	ical Action Commit	tee 			
_	Full Name (Last, First, Middle Initial)			Data of Dist		
A.	Lincoln PAC			Date of Disbursement	/ Y Y Y Y	
ľ	Mailing Address c/o Caryn Eggeraat			05 02	2012	
(209 Pennsylvania Ave., SE Dity	State Zip Code				
	Nashington S	DC 20003		Transaction ID : D12	27954	
Ī	Purpose of Disbursement Contributions for Federal PACs/Committees		011	Amount of Each Disb	ursement this Period	
(Candidate Name			5. 24511 Blob		
_			Category/ Type		2500.00	
(nent For: 2012				
		Primary General Other (specify) ▼				
5	State: District:	Annual contribu	tion			
	Full Name (Last, First, Middle Initial)					
В.	Linda Lingle Senate Committee			Date of Disbursement	/	
1	Mailing Address 1020 N. Fairfax Street Suite 201			06 21	2012	
	Alexandria	State Zip Code VA 22314		Transaction ID : D1	34234	
Ē	Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disb	ursement this Period	
7	Candidate Name		Category/ Type	7	5000.00	
Ō		nent For: 2012				
		Primary General				
	President State: HI District:	Other (specify) ▼				
	Full Name (Last, First, Middle Initial)			Data of Dishamon		
C.	Lynn Jenkins for Congress			Date of Disbursement		
1	Mailing Address 4011 SW 21st			06 / 21	2012	
(State Zip Code		Transaction ID : D1	34211	
	Fopeka Purpose of Disbursement	KS 66604		11a113aCtiOII ID . D1	V7411	
,	Contributions for Federal Candidates	011	Amount of Each Disb	ursement this Period		
	Candidate Name		Category/	Carrie of Eugli Blob		
	Lynn Jenkins		Type		2000.00	
	Senate President	nent For: 2012 Primary General Other (specify)				
_	State: KS District: 02					
SL	IBTOTAL of Disbursements This Page (optional)		···········		9500.00	
тс	TAL This Period (last page this line number only)		·····	4	7	

for each category of the Detailed Summary Page of the Detailed Summary Pag	SCHEDULE B (FEC Form 3X)		FOR LINE	-			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committies. NAME OF COMMITTEE (in Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. Majority Fund Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington DC 20003 Purpose of Disbursement Contributions to National Party Committees Cardidate Name Category Type District: Full Name (Last, First, Middle Initial) B. Markey Committee, The Mailing Address PO Box 528 City Maddling Address PO Box 528 City State: Full Name (Last, First, Middle Initial) B. Markey Committee, The Mailing Address PO Box 528 City Maddling Address PO Box 528 City Makes A Till Name Category Types of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Other (specify) Full Name (Last, First, Middle Initial) C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State: MA District: Full Name (Last, First, Middle Initial) C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State: MA District: Full Name (Last, First, Middle Initial) C. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) C. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) C. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Disbursement For: 2012 Primary General Disbursement For: 2012 Primary General Disbursement For: 2012 Transaction ID: D129068 Amount of Each Disbursement Category Type 1500.00 Transaction ID: D129068 Amount of Each Disbursement Category Type 1500.00	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	I ' — '				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A Majority Fund Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington Purpose of Disbursement Contributions to National Party Committees Candidate Name Cardidate Name City Madiling Address PO Box 528 City Madiling Address PO Box 3750 City State Senate Primary Prisedent State Disbursement Contributions for Federal Candidates Candidate Name Candidate N							
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) National Emergency Medicine Political Action Committee Full Mame (Last, First, Middle Initial) A. Majority Fund Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington Disbursement Contributions to National Party Committees Cardidate Name Cardidate Name Full Name (Last, First, Middle Initial) B. Markey Committee, The Mailing Address PO Box 526 City Madiord Makey Committee, The Mailing Address PO Box 526 City Madiord Markey Committee, The Mailing Address PO Box 526 City State Purpose of Disbursement Contributions for Federal Cardidates Candidate Name Rep. Edward J. Markey Office Sought: Planse Planse Senate Primary Seneral Purpose of Disbursement Contributions for Federal Cardidates Con		<u> </u>					
NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. Majority Fund Mailing Address ATTN: RNC Finance Division 310 First Street, SE City State Zip Code							
Full Name (Last, First, Middle Initial) A. Majority Fund Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington Contributions to National Party Committees Candidate Name President State: President State: President Mailing Address PO Box 526 City State Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey City State: Disbursement For: 2012 Senate President State: Disbursement For: 2012 City State Zip Code Ma 02155 Transaction ID: D127753 Amount of Each Disbursement Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Distort: Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Full Name (Last, First, Middle Initial) Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sou	NAME OF COMMITTEE (In Full)						
A. Majority Fund Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington DC 20003 Prupose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Olice Sough: House Disbursement For: 2012 Primary State Disbursement Mailing Address PO Box 526 City Meditord Markey Committee, The Mailing Address PO Box 526 City Meditord Markey Committee, The Mailing Address PO Box 526 City Meditord Markey Committee, The Mailing Address PO Box 526 City Meditord Markey Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Olice Sough: House Disbursement For: 2012 Primary Category' Type Category' Type Category' Type Disbursement For: 2012 Primary Category' Type Category' Type Category' Transaction ID: D128763 Amount of Each Disbursement this Period Category' Type Disbursement This Period Category' Type Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Disbursement Edward J. Markey City State Zip Code Tin 37024 Primary General President Transaction ID: D129088 Transaction ID: D129088 Amount of Each Disbursement this Period Category' Transaction ID: D129088 Transaction ID: D129088 Amount of Each Disbursement this Period Category' Transaction ID: D129088 Transaction ID: D129088 Transaction ID: D129088 Transaction ID: D129088 Amount of Each Disbursement this Period Category' Transaction ID: D129088 Transaction ID: D1290	National Emergency Medicine Pol	itical Action Committ	ee				
Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington DC 20003 Purpose of Disbursement Contributions to National Party Committees Candidate Name Office Sought: House President State: President Mailing Address PO Box 526 City Maddrod Maddrod Ma 02155 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: House Disbursement For: 2012 Senate President Office Sought: Office Sought: Primary General Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: House Disbursement For: 2012 Senate President State: Ma District: Full Name (Last, First, Middle Initial) C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State Zip Code TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Disbursement For: 2012 Senate President State: Name Rep. Marsha Blackburn Office Sought: House Disbursement For: 2012 Senate President State: TN District: Of State Senate Primary General				B			
Mailing Address ATTN: RNC Finance Division 310 First Street, SE City Washington DC 20003 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: Full Name (Last, First, Middle Initial) State: MA District: Full Name (Last, First, Middle Initial) State: Disbursement For: 2012 Senate Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Cther (specify) Full Name (Last, First, Middle Initial) State: MA District: Full Name (Last, First, Middle Initial) Candidate Name Rep. Edward J. Markey Office Sought: Full Name (Last, First, Middle Initial) State: MA District: Full Name (Last, First, Middle Initial) Candidate Name Rep. Edward J. Markey Office Sought: Full Name (Last, First, Middle Initial) Chart (specify) Full Name (Last, First, Middle Initial) Chart (specify) Full Name (Last, First, Middle Initial) Candidate Name Rep. Marsha Blackburn Rep. Marsha Blackburn Rep. Marsha Blackburn Rep. Marsha Blackburn Office Sought: Full Name Rep. Marsha Bla	A. Majority Fund						
City Washington Purpose of Disbursement Contributions to National Party Committees Candidate Name Office Sought:	Mailing Address ATTN: RNC Finance Division						
Washington Purpose of Disbursement Contributions to National Party Committees Candidate Name Office Sought:							
Purpose of Disbursement Contributions to National Party Committees Candidate Name Office Sought:				Transaction ID : D127753			
Contributions to National Party Committees Candidate Name Category/ Type Office Sought: House Primary General Primary Gene	· ·	DC 20003					
Office Sought: House Senate President State: Disbursement For: 2012 Senate President State: Disbursement Tontributions for Federal Candidates Disbursement For: 2012 Senate President State: Markay Disbursement For: 2012 Senate President State: Markay Disbursement For: 2012 Senate President State: Markay Disbursement Contributions for Federal Candidates Date of Disbursement this Period Disbursement For: 2012 Primary General President State: Markay Disbursement For: 2012 Primary General President Disbursement Contributions for Federal Candidates Date of Disbursement Tontributions for Federal Candidates Date of Disbursement Tontributions for Federal Candidates Date of Disbursement Candidate Senate President Disbursement Candidates Date of Disbursement Date of Disb			011	Amount of Each Disbursement this Period			
Office Sought: House President State: District: Primary General President State: District: District: District: Primary General President State: TN District: Other (specify) ▼ Date of Disbursement Other (specify) ▼ Date of Disbursement Transaction ID : D128763 Amount of Each Disbursement this Period Category/ Type Transaction ID : D128763 Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Disbursement For: 2012 Senate President State: MA District: Di	Candidate Name		Category/	45000.00			
Senate President District: Full Name (Last, First, Middle Initial) B. Markey Committee, The Mailing Address PO Box 526 City Medord MA 02155 Purpose of Disbursement Contributions for Federal Candidates Rep. Edward J. Markey Office Sought: House President State Zip Code MA District: Full Name (Last, First, Middle Initial) Committee Name President President State Zip Code MA 02155 Full Name (Last, First, Middle Initial) Committee Name President State Zip Code Type Senate President State: MA District: Full Name (Last, First, Middle Initial) Committee Name Category/ Tipe State Zip Code Tin 37024 Furpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President Senate President Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President Senate President State: Tin District: 07 Subtrotal of Disbursement For: 2012 Primary General Cadegory/ Type 1500.00 Subtrotal of Disbursements This Page (optional)				15000.00			
State: District:							
Full Name (Last, First, Middle Initial) B. Markey Committee, The Mailing Address PO Box 526 City State Zip Code Medrord Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: House Priesident President State: MA District: Full Name (Last, First, Middle Initial) C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State Zip Code TN 37024 Purpose of Disbursement Contributions for Federal Candidates City State Zip Code TN 37024 Full Name (Last, First, Middle Initial) Candidate Name Rep. Box 3750 City State Zip Code TN 37024 Full Name (Last, First, Middle Initial) Committee of Disbursement This Page (optional) Transaction ID: D129088 Amount of Each Disbursement Transaction ID: D129088 Amount of Each Disbursement Transaction ID: D129088 Amount of Each Disbursement Transaction ID: D129088 Amount of Each Disbursement Transaction ID: D129088 Amount of Each Disbursement This Period Disbursement This Period Other (specify) Type Subtrotal of Disbursements This Page (optional) Transaction ID: D129088							
Mailing Address PO Box 526 City		Other (opcomy)					
Mailing Address PO Box 526 City	Full Name (Last, First, Middle Initial)						
Mailing Address PO Box 526 City				Date of Disbursement			
City Medford MA 02155 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought:							
Medford Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: State: MA District: Full Name (Last, First, Middle Initial) City Brentwood Purpose of Disbursement Contributions for Federal Candidates City Brentwood Purpose of Disbursement Contributions for Federal Candidates Category/ Type District: Date of Disbursement Transaction ID: D129783 Amount of Each Disbursement this Period Date of Disbursement Date of Disbursement Transaction ID: D129783 Amount of Each Disbursement this Period Date of Disbursement Transaction ID: D129783 Amount of Each Disbursement Transaction ID: D129783 Amount of Each Disbursement Transaction ID: D129783 Amount of Each Disbursement Transaction ID: D129783 Date of Disbursement Transaction ID: D129783 Transaction ID: D129783 Transaction ID: D129783 Transaction ID: D12978 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Substotal of Disbursements This Page (optional)	Mailing Address PO Box 526			05 16 2012			
Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Edward J. Markey Office Sought: House President State: MA District: Full Name (Last, First, Middle Initial) City Brentwood Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: Finall Name (Last, First, Middle Initial) City State Zip Code TN 37024 Transaction ID: D129088 Amount of Each Disbursement Transaction ID: D129088 Amount of Each Disbursement Other (specify) Type Other (specify) State Tip Code To Disbursement Other (specify) Type Other (specify) State: TN District: OT SUBTOTAL of Disbursements This Page (optional)		·		Transaction ID : D128763			
Candidate Name Rep. Edward J. Markey Office Sought: House		02133					
Rep. Edward J. Markey Office Sought: House Senate President State: MA District: Primary General President State: MA District: Primary General President State: Marsha Blackburn City State Zip Code TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President State: TN District: 07 Subtrotal of Disbursements This Page (optional)	Contributions for Federal Candidates		011	Amount of Each Disbursement this Period			
Office Sought: House				5000.00			
Senate President Other (specify) C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State Zip Code TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President State: TN District: 07 SUBTOTAL of Disbursements This Page (optional)		The second secon	Туре	0000.00			
State: MA District: C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State Zip Code TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President State: TN District: 07 SUBTOTAL of Disbursements This Page (optional)							
State: MA District: Full Name (Last, First, Middle Initial) C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 City State Zip Code Brentwood TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President State: TN District: 07 SUBTOTAL of Disbursements This Page (optional)		`					
C. MARSHA BLACKBURN FOR CONGRESS INC. Mailing Address PO Box 3750 Date of Disbursement]					
Mailing Address PO Box 3750 City State Zip Code Brentwood TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President President State: TN District: 07 Subtotal of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)						
City Brentwood TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: State: TN District: 07 Mailing Address PO Box 3750 05 24 2012	C. MARSHA BLACKBURN FOR CO	NGRESS INC.		Date of Disbursement			
City State Zip Code TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate Primary General Other (specify) State: TN District: 07 Subtrotal of Disbursements This Page (optional)	Mailian Address DO D. 1975						
Brentwood TN 37024 Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate Primary General Other (specify) ▼ State: TN District: 07 Substotal of Disbursements This Page (optional)	Mailing Address PO Box 3750			05 24 2012			
Brentwood Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate President President State: TN District: 07 Subtrotal of Disbursements This Page (optional) Subtrotal of Disbursements This Page (optional) Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type 1500.00	City	State Zip Code		Transaction ID - D420000			
Contributions for Federal Candidates Candidate Name Rep. Marsha Blackburn Office Sought: House Senate Primary General Other (specify) State: TN District: 07 Subtotal of Disbursements This Page (optional)		TN 37024		Hansaction ID: D129088			
Candidate Name Rep. Marsha Blackburn Office Sought:			011				
Rep. Marsha Blackburn Office Sought: House Senate Primary General Other (specify) State: TN District: 07 Substructs Of Disbursements This Page (optional)	Candidate Name						
Office Sought: House Senate Primary General Other (specify) State: TN District: 07 SUBTOTAL of Disbursements This Page (optional)				1500.00			
State: TN District: 07 SUBTOTAL of Disbursements This Page (optional)		ement For: 2012	.,,,,				
State: TN District: 07 SUBTOTAL of Disbursements This Page (optional)	Senate	Primary General					
SUBTOTAL of Disbursements This Page (optional)		Other (specify) ▼					
SUBTOTAL OF DISDUISEMENTS THIS Page (Optional)	State: TN District: 07						
SUBTOTAL OF DISDUISEMENTS THIS Page (Optional)				21500.00			
TOTAL This Period (last page this line number only)	SUBTUTAL of Disbursements This Page (optional).		<u> </u>	21300.00			
TOTAL THIS FORCE (183) Page this line number only /	TOTAL This Period (last page this line number only	/)					

SC	HEDULE B (FEC Form 3X)		FOR LINE				NUMBER: PAGE 189 OF 227						
ITE	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			eck o	nly o	ly one)						
	-	Detailed Sur			21		22 🗙 23 24 25					26	
_					27		28a		28b	280		29	30k
	y information copied from such Reports and Stater for commercial purposes, other than using the nan												
$\overline{}$	NAME OF COMMITTEE (In Full)	ic and address	or arry politice	ai comi	milioc	10 3	Olicit CO	THITIDE	1110113	110111 30	don de	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	National Emergency Medicine Poli	tical Action	Committe	20									
	Mational Enlergency Medicine Foll	licai Actioi	Committee										
	Full Name (Last, First, Middle Initial)												
A.	MARSHA BLACKBURN FOR CON	IGRESS II	VC.				Date of	f Disl	burser	ment			
	Matter Address BOD and					M M / D D / Y Y Y Y					Y		
	Mailing Address PO Box 3750						04 25 2012						
	City	State Z	p Code										
	Brentwood	TN 3	7024		Trans	sactio	on ID	D1277	73				
	Purpose of Disbursement Contributions for Federal Candidates			-04						.			
	Candidate Name			01	1		Amoun	t of E	ach I	Disburs	ement	this I	eriod
	Rep. Marsha Blackburn			Cate Typ								1500	.00
	•	ment For: 201:		ı yı	, ,	\dashv			7				
	Senate		General										
	President	Other (specify)	V										
_	State: TN District: 07												
_	Full Name (Last, First, Middle Initial)						Data	(D:-I					
В.	Martin Heinrich for Senate						Date of			_			
	Mailing Address PO BOX 1174					-	M = M	'	09			012	Y
	maining realises 10 BOX 1174						90		,			·	
	City		p Code				Trans	sactio	on ID	: D1281	136		
	SPRINGFIELD Purpose of Disbursement	VA 2	2151										
	Contributions for Federal Candidates			01	11		Amoun	t of F	ach I	Disburs	ement	this I	Period
	Candidate Name										• • • • • • • • • • • • • • • • • • • •		
	Sen. Martin Heinrich			Cated Typ					,	,		2500	0.00
	Office Sought: House Disburser	ment For: 201	2										
	Senate	Primary	X General										
	State: NM District:	Other (specify)	▼										
	Full Name (Last, First, Middle Initial)												
_	McKinley for Congress						Date of	f Disl	burser	ment			
	Werkiney for Congress						M M	_	D	_	YY	Y	Υ
	Mailing Address P.O. Box 6861						05		24			012	
	0.0												
	City Wheeling		ip Code 6003				Trans	sactio	on ID	: D129 1	105		
	Purpose of Disbursement		0000			\vdash							
	Contributions for Federal Candidates			01	1		Amoun	t of E	Each I	Disburs	ement	this I	Period
	Candidate Name			Cate	gory/	'		-	-	-	_	1000	00
	000			Тур	ре				,	,		1000	.00
	Office Sought: House Disburser Senate	nent For: 201: Primary	2 ⋌ General										
	President	Other (specify)											
	State: WV District: 01	(Spoony)	•										
	1							-	-		_	-	-
s	JBTOTAL of Disbursements This Page (optional)				▶				,			5000	.00
H								-				-	
I TO	DTAL This Period (last page this line number only)				▶		1 .						

	CHEDULE B (FEC Form 3X)	Hen on	e separate schedule(s) FOR LINE NUMBER: (check only one)			PAGE 190 OF 227		
IT	EMIZED DISBURSEMENTS	ioi each category of the					24 25 26	
		Detailed	I Summary Page	21b 27	22 28a	23 28b	28c 29 30b	
	ny information copied from such Reports and Staten							
or	for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	ie and ad	aress of any politic	cai committee to	SOIICIT CO	ntributions	from such committee.	
$ \rangle$	National Emergency Medicine Polit	ical Ac	tion Committ	ee				
\angle	Full Name (Last, First, Middle Initial)							
Α.	McKinley for Congress	Date o	f Disburser	ment				
					M M	/ D		
	Mailing Address P.O. Box 6861				04	11	2012	
	,	State	Zip Code		Trans	action ID :	D127346	
	Purpose of Disbursement	WV	26003					
	Contributions for Federal Candidates			011	Amoun	t of Each [Disbursement this Period	
	Candidate Name			Category/			1500.00	
	Office Sought:	nent For:	2012	Туре		7		
		Primary	General					
	State: WV District: 01	Other (sp	ecity) 🔻					
	Full Name (Last, First, Middle Initial)							
В.	Mo Brooks for Congress				Date o	f Disburser	nent	
	Mailing Address 7610 Foxfire Dr SE				M = M 06	/ D 13		
					4.			
	City S Huntsville	State AL	Zip Code 35802-2716		Trans	saction ID	: D133887	
	Purpose of Disbursement Contributions for Federal Candidates			1				
	Candidate Name			011	Amoun	t of Each I	Disbursement this Period	
				Category/ Type		,	1000.00	
	Office Sought: House Disbursen							
		Primary Other (sp	General ecify) ▼					
	State: AL District: 05	` '	· · ·					
_	Full Name (Last, First, Middle Initial)				Data o	f Disburser	nont	
C.	Moderate Democrats PAC				M M	/ Disburser		
	Mailing Address 303 Massachusetts Avenue, NE				06	21		
	City	State	Zip Code				D.40.4007	
	Washington	DC	20002		Trans	saction ID	: D134207	
	Purpose of Disbursement Contributions for Federal PACs/Committees 011				Amoun	t of Each [Disbursement this Period	
	Candidate Name			Category/	Amoun	t or Each t		
	Office Sought: House Disbursen	nont For:	2042	Туре		-	5000.00	
		Primary	General					
		Other (sp	•					
	State: District:		Annual contributi	ons				
5	UBTOTAL of Disbursements This Page (optional)						7500.00	
F	age (epilonal)				-			
[T	OTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)		Lies concrete cohedula(s)			PAGE 191 O	F 227		
IT	EMIZED DISBURSEMENTS	for each c	ategory of the	(check only	one) 22 🔀 23 24 25			□ 26
		Detailed S	Summary Page	27	28a	28b	28c 29	30b
	ny information copied from such Reports and Statem							
or	for commercial purposes, other than using the name	e and addre	ess of any polition	al committee to	solicit co	ntributions	trom such committe	e.
	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Actio	an Commi tt	00				
\mathbb{Z}	National Emergency Medicine Polit	icai Actil						
_	Full Name (Last, First, Middle Initial)				D-4 -	Dielerer		
A.	NEXT CENTURY FUND				Date of	f Disburser		V
	Mailing Address 116 S ROYAL STREET				05	24		Y
	0111		7'- 0-d-					
	City S ALEXANDRIA	state VA	Zip Code 22314		Trans	action ID :	D129104	
	Purpose of Disbursement							
	Contributions for Federal PACs/Committees			011	Amoun	t of Each [Disbursement this Pe	eriod
	Candidate Name			Category/			2000.0	00
	Office Sought: House Disbursen	nent For: 20	<u> </u> 012	Туре				
	Senate	Primary	General					
		Other (speci		ian				
_	State: District: Full Name (Last, First, Middle Initial)		Annual contribut	ion				
В.	Ohio's Future PAC				Date o	f Disburser	ment	
					M = M	/ D I	D / Y Y Y Y	Υ
	Mailing Address 900 19th Street, NW				06	27	2012	
	-	state	Zip Code		Trans	saction ID :	: D134478	
	Washington Purpose of Disbursement	DC	20006					
	VOID CK 7723 6/27/12					t of Each [Disbursement this Pe	eriod
	Candidate Name			Category/	-1500.00			
	Office Sought: House Disbursen	nent For: 20	044	Туре		-	1000.	00
		Primary	General		VOID C	K 7723 6/2	77/12	
		Other (speci	fy) ▼		VOID	1125 0/2	.1/12	
	State: District:		OID CK 7723 6/2	27/12				
_	Full Name (Last, First, Middle Initial)				Data a	f Disburser	ment	
C.	Olson for Congress Committee				M M	/ D		V
	Mailing Address PO Box 16381				06	21		
	City	state	Zip Code		-		- D404004	
	Sugar Land	TX	77496		Frans	action ID :	: D134224	
	Purpose of Disbursement Contributions for Federal Candidates			011				
	Candidate Name				Amoun	t of Each L	Disbursement this Po	eriod
	Pete Olson			Category/ Type			2000.0	00
		ent For: 20						
		Primary Other (eneci	General					
	State: TX District: 22	Other (speci	''y) ▼					
Г								-
5	SUBTOTAL of Disbursements This Page (optional)			·····•		,	2500.0	00
L					-			-
ľ	'OTAL This Period (last page this line number only)			••••••				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 192 OF 227 (check only one)					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 🗶 23 🔲 24 🔲 25 🔲 2	26 80b				
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) National Emergency Medicine Pol								
Full Name (Last, First, Middle Initial) A. ORRINPAC			Date of Disbursement					
Mailing Address 175 S. WEST TEMPLE SUITE 65	0		04 25 2012					
City SALT LAKE CITY	State Zip Code UT 84101		Transaction ID : D127757					
Purpose of Disbursement Contributions for Federal PACs/Committees		011	Amount of Each Disbursement this Period					
Candidate Name	'	Category/ Type	2500.00	1				
Office Sought: House Disburse Senate President	ment For: 2012 Primary General Other (specify)	Nr	, , ,					
State: District:	Annual contribution	on						
Full Name (Last, First, Middle Initial) B. Paige Kreegel for Congress Mailing Address PO Box 62331			Date of Disbursement O5 24 2012					
City Fort Myers	State Zip Code FL 33906		Transaction ID : D129097					
Purpose of Disbursement Contributions for Federal Candidates Candidate Name Dr Paige Kreegel		011 Category/ Type	Amount of Each Disbursement this Period 2500.00]				
	ment For: 2012 Primary General Other (specify)							
Full Name (Last, First, Middle Initial) C. Paige Kreegel for Congress			Date of Disbursement					
Mailing Address PO Box 62331			05 24 2012					
City Fort Myers	State Zip Code FL 33906		Transaction ID : D129129					
Purpose of Disbursement Contributions for Federal Candidates Candidate Name		011	Amount of Each Disbursement this Period					
Dr Paige Kreegel Office Sought: House Senate President State: FL District: 19	ment For: 2012 Primary General Other (specify)	Category/ Type	2500.00					
SUBTOTAL of Disbursements This Page (optional).			7500.00	Ī				

SCHEDULE B (FEC Form 3X)		FOR LINE I		_
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30	
Any information copied from such Reports and Stat	 ements may not be sold or use	d by any perso	on for the purpose of soliciting contributions	_
or for commercial purposes, other than using the na				_
NAME OF COMMITTEE (In Full)	Program Andrew Organism			
National Emergency Medicine Po	litical Action Committe	ee		
Full Name (Last, First, Middle Initial)				_
A. Pat Meehan for Congress			Date of Disbursement	
Mailing Address 5035 Township Line Rd			06 27 2012	
City	State Zip Code			_
Drexel Hill	PA 19026-4821		Transaction ID: D134475	
Purpose of Disbursement VOID CK 7682 6/27/12			Amount of Each Disbursement this Period	
Candidate Name		Category/	-2500.00	
Pat Meehan Office Sought: House Disburs	ement For: 2012	Туре	, , , ,	
Senate Stagnic	Primary General		VOID CK 7682 6/27/12	
President	Other (specify) ▼			
State: PA District: 07				_
Full Name (Last, First, Middle Initial) B. Pat Meehan for Congress			Date of Disbursement	
Fat Meenan for Congress			M M / D D / Y Y Y Y	
Mailing Address 5035 Township Line Rd			06 28 2012	
City Drexel Hill	State Zip Code PA 19026-4821		Transaction ID : D134515	
Purpose of Disbursement	10020 1021			
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period	
Candidate Name Pat Meehan		Category/ Type	1000.00	
	ement For: 2012	туре		
Senate	Primary General			
President PA District 97	Other (specify) ▼			
State: PA District: 07 Full Name (Last, First, Middle Initial)				_
C. Paul Gosar for Congress			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address P.O. Box 368			05 02 2012	
City	State Zip Code		Transaction ID : D127973	
Falls Church Purpose of Disbursement	VA 22040			
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period	
Candidate Name	'	Category/ Type	2500.00	
Office Sought:	ement For: 2012	Турс	7 7 7	
Senate	Primary General			
President President	Other (specify)			
State: AZ District: 01				_
SUBTOTAL of Disbursements This Page (optional)			1000.00	
TOTAL This Period (last page this line number on	y)	••••••		

S	CHEDULE B (FEC Form 3X)	CHEDULE B (FEC Form 3X)			I INI⊏	NIIMP	MBFR: PAGE 194 OF 227							
	EMIZED DISBURSEMENTS	Use separate schedule(s)	- 1	_		only one)								
••		for each category of the Detailed Summary Page			21b	2		X	_		24		25	26
_					27		3a		28b		28		29	30
	ny information copied from such Reports and Staten													
or	for commercial purposes, other than using the name	ie and address of any politic	ai con	ıımıt	iee to	SOIICIT	со	ntrik	oution	ıS	irom s	ucn	comm	цее.
	NAME OF COMMITTEE (In Full)	ical Action Commit	100											
/	National Emergency Medicine Political	icai Action Commit	lee											
	Full Name (Last, First, Middle Initial)													
A.	People for Enterprise/Trade/Econ (Growth				Dat	e o	f Di	sburs	sen	nent			
	· · · · · · · · · · · · · · · · · · ·						M	/		[Y Y	Y
	Mailing Address 7804 Evening Lane)5	4	Н	02	_		2012	_
	City	State Zip Code												
	Alexandria	VA 22306				Tr	ans	sact	ion I	D:	D127	966		
	Purpose of Disbursement Contributions for Federal PACs/Committees				\neg									
			C)11		Am	oun	t of	Eacl	1 E	Disburs	seme	nt this	Period
	Candidate Name		Cate										500	00.00
	Office Sought: House Disburser	nent For: 2012	- 1	ype					7	Ť			_	
	Senate	Primary General												
	President	Other (specify) ▼												
_	State: District:	Annual contribu	tion											
_	Full Name (Last, First, Middle Initial)													
В.	PRESERVING AMERICA'S TRAD	ITIONS (PATPAC)						t Di —	sburs	sen	nent			
	Mailing Address 610 S. BOULEVARD						= м 05	1	D	02			Y Y Y 2012	Y
	Walling Address 610 S. BOOLLVARD						00			02			2012	
	City	State Zip Code				Tr	ans	sact	tion I	D .	D127	953		
	TAMPA	FL 33606				•	uii	Juoi		٠.		500		
	Purpose of Disbursement Contributions for Federal PACs/Committees			011		Am	าเมา	t of	Fact	ıГ	Dishurs	seme	nt this	Period
	Candidate Name				0.1/	7	Juii	. 0.	Laoi		71000			1 01100
			Cate T	ype					7	L			250	00.00
	Office Sought: House Disburser	nent For: 2012												
	Senate	Primary General												
		Other (specify) ▼	t!											
_	State: District:	annual contribu	แบก											
C	Full Name (Last, First, Middle Initial) Renacci for Congress					Dat	e o	f Di	sburs	sen	nent			
٠.	Nenacci for Congress						_ M	 ,		1	_	Υ	Y Y	Y
	Mailing Address 2729 - B						06		_	06			2012	
	Fulton Drive NW													
		State Zip Code OH 44718				Tr	ans	sact	tion I	D:	D133	715		
	Canton Purpose of Disbursement	44/10												
	Contributions for Federal Candidates		C)11		Am	oun	t of	Eacl	η Γ	Disburs	seme	nt this	Period
	Candidate Name Catego				rv/			. 51						
				ype					7				100	00.00
		nent For: 2012		_										
	Senate President	Primary General												
	State: OH District: 16	Other (specify) ▼												
	OII DIOLIOL 10					_								
s	SUBTOTAL of Disbursements This Page (optional)				•		_		_	_			850	0.00
F						-	-	÷	7	÷			=	
Т	OTAL This Period (last page this line number only)				•				7					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 195 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Anninformation conicd from such Departs and Clat			
Any information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Po	litical Action Commi	ttee	
Full Name (Last, First, Middle Initial)			
A. ANN MARIE BUERKLE FOR CO	NGRESS		Date of Disbursement
Mailing Address 815 King Street, Suite 311			05 02 2012
City	State Zip Code		Transaction ID : D127960
Alexandria	VA 22314		Transaction ib . D121300
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Ann Marie Buerkle		Туре	2000.00
Senate President	ement For: 2012 Primary General Other (specify)		
State: NY District: 25			
Full Name (Last, First, Middle Initial) B. BEN CHANDLER FOR CONGRE	SS		Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address P. O. Box 12678			06 21 2012
City Lexington	State Zip Code KY 40508		Transaction ID : D134214
Purpose of Disbursement Contributions for Federal Candidates		010	Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispursement this Penou
Rep. Ben Chandler		Category/ Type	2500.00
•	ement For: 2012	1,752	,
Senate	Primary		
President	Other (specify) ▼		
State: KY District: 06			
Full Name (Last, First, Middle Initial)	000000		Data of Dishursament
C. BILL JOHNSON FOR CONGRES	S COMMITTEE		Date of Disbursement
Mailing Address P.O. BOX 14496			06 06 2012
City	State Zip Code		Transaction ID : D133716
POLAND Purpose of Disbursement	OH 44514		*
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispursement this Period
Rep. Bill Johnson		Category/ Type	2500.00
Office Sought: House Disburs	ement For: 2012		
Senate	Primary General		
President President	Other (specify) ▼		
State: OH District: 06			
SUBTOTAL of Disbursements This Page (optional)			7000.00
TOTAL This Period (last page this line number on	y)	·····	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 196 O	F 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b	22 X 23 24 25 28a 28b 28c 29	26 30b
Any information copied from such Reports and Sta	ements may not be sold or u			
or for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)				
National Emergency Medicine Po	litical Action Commit	tee		
Full Name (Last, First, Middle Initial)				
A. BILLY LONG FOR CONGRESS			Date of Disbursement	
Mailing Address 3246 E. RIDGEVIEW STREET			05 02 2012	Y
City	State Zip Code		Transaction ID - D427062	
SPRINGFIELD	MO 65804		Transaction ID : D127962	
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this P	eriod
Candidate Name		Category/	1000.	00
Rep. Billy Long Office Sought:	sement For: 2012	Туре		
Senate Seagnit.	Primary General			
President	Other (specify) ▼			
State: MO District: 07	<u> </u>			
Full Name (Last, First, Middle Initial)			D. (101)	
B. BILLY LONG FOR CONGRESS			Date of Disbursement	
Mailing Address 3246 E. RIDGEVIEW STREET			06 21 2012	Y
City	State Zip Code		Transportion ID - D424222	
SPRINGFIELD	MO 65804		Transaction ID : D134223	
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this P	eriod
Candidate Name		Category/	1500	00
Rep. Billy Long		Type	1500.	.00
	ement For: 2012			
Senate President	Primary General Other (specify) ▼			
State: MO District: 07	Other (opeony)			
Full Name (Last, First, Middle Initial)				
C. BOBBY SCHILLING FOR CONG	RESS		Date of Disbursement	
	_		M M / D D / Y Y Y Y	Υ
Mailing Address 367 Avenue of The Cities Suite I)		04 11 2012	
City	State Zip Code		_ ,	
East Moline	IL 61244		Transaction ID: D127338	
Purpose of Disbursement Contributions for Federal Candidates				
Candidate Name		011	Amount of Each Disbursement this P	eriod
Rep. Bobby Schilling		Category/ Type	2500.	00
	sement For: 2012	Type		
Senate	Primary Seneral			
President	Other (specify) ▼			
State: IL District: 17				
			5000	00
SUBTOTAL of Disbursements This Page (optional)	······································	5000.0	UU
TOTAL This Povied (lost nose this line name)	lw)			
TOTAL This Period (last page this line number on	ıy)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 197 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 2 28a 28b 28c 29 3
Any information copied from such Reports and State	ments may not be cold or us		
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Po	litical Action Commit	tee	
Full Name (Last, First, Middle Initial)			Data of Dishumanast
A. BRIAN BILBRAY FOR CONGRES	55		Date of Disbursement
Mailing Address 991C Lomas Santa Fe Drive			06 13 2012
City	State Zip Code		Transaction ID - D122900
Solana Beach	CA 92075		Transaction ID : D133890
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Brian P. Bilbray Office Sought: House Disburs	ement For: 2012	Туре	111300
Senate President	Primary		
State: CA District: 50			
Full Name (Last, First, Middle Initial)			
B. BRIAN BILBRAY FOR CONGRE	SS		Date of Disbursement
Mailing Address 991C Lomas Santa Fe Drive			06 27 2012
City Solana Beach	State Zip Code CA 92075		Transaction ID : D134476
Purpose of Disbursement VOID CK 7748 6/27/12			Amount of Each Disbursement this Period
Candidate Name		Category/	-1000.00
Rep. Brian P. Bilbray		Туре	-1000.00
	ement For: 2012 Primary General		VOID OV 7740 0/07/40
President	Other (specify)		VOID CK 7748 6/27/12
State: CA District: 50	(-[
Full Name (Last, First, Middle Initial)	TI D.		Date of Disbursement
C. FRIENDS OF CAROLYN MCCAF	KIHY		
Mailing Address 151 Linden Road			06 21 2012
City	State Zip Code		Transaction ID : D134217
Mineola	NY 11501		11a115aCtiOi1 ID . D134217
Purpose of Disbursement Contributions for Federal Candidates		011	
Candidate Name			Amount of Each Disbursement this Period
Rep. Carolyn McCarthy		Category/ Type	1000.00
	ement For: 2012	71	
Senate	Primary General		
President	Other (specify) ▼		
State: NY District: 04			
SUBTOTAL of Disbursements This Page (optional)		·····	1000.00
		·	
TOTAL This Period (last page this line number onl	y)		

2	CHEDULE B (FEC Form 3X)													
	· · ·	Llee con	arate schedule(s)	_			UMBER:	:			PAGE	198	OF 2	227
IT	EMIZED DISBURSEMENTS		category of the	(che	eck o	· -						٦	_	00
			Summary Page		21	L	22		23	2		25		26
					27		28a	2	28b	2	8c	29		30b
	ny information copied from such Reports and Statem													
or	for commercial purposes, other than using the name	e and add	ress of any politica	al comr	mittee	to s	solicit co	ntribut	ions	trom	such	commit	tee.	
	NAME OF COMMITTEE (In Full)													
	National Emergency Medicine Polit	ical Act	ion Committe	ee										
<u>/_</u>														
	Full Name (Last, First, Middle Initial)													
Α.	CATHY MCMORRIS RODGERS F	OR CO	NGRESS				Date of	t Disb	ursei	nent				
						_	M = M	/	D	- 1		Y Y	Υ	
	Mailing Address Box 137						06		13	5	_	2012		
	City	Ptoto	Zin Codo			+								
	,	State WA	Zip Code 99210				Trans	actio	n ID	D13	3891			
	Purpose of Disbursement		99210			\dashv								
	Contributions for Federal Candidates			01	1		Amoun	t of F	ach I	Dishu	rseme	nt this	Period	4
	Candidate Name			_			Amoun	. 01	uon i	31000	001110	110	1 01100	_
	Rep. Cathy McMorris Rodgers			Cateo								200	0.00	
		nent For:	2012	Тур	De	_		,			7			
		Primary	General											
		Other (spe												
	State: WA District: 05	Other (spe	City) \											
						+								
В.	Full Name (Last, First, Middle Initial)	OD 00	NODEGO				Date of	f Dich	urooi	mont				
Ο.	CATHY MCMORRIS RODGERS F	OR CO	NGRESS				Date 0	ו טואט	urser	пепі				
	Mailing Address B. 407					\dashv	M = M	/	25		Y	y y y 1 2012	Y	
	Mailing Address Box 137						04	4.1	20	,		2012		
	City	State	7in Code			+								
	•	State WA	Zip Code 99210				Trans	sactio	n ID	: D12	7759			
	-	State WA	Zip Code 99210				Trans	sactio	n ID	: D12	7759			
	Spokane			01	11		Trans					nt this	Perioc	
	Spokane Purpose of Disbursement											nt this	Period	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name			Cateo	gory/							-	Period	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates	WA			gory/							-	_	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Disbursem	WA	99210	Cateo	gory/							-	_	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate Disbursem	wa	99210 2012 General	Cateo	gory/							-	_	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate Disbursem	ment For:	99210 2012 General	Cateo	gory/							-	_	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05	ment For:	99210 2012 General	Cateo	gory/							-	_	d
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial)	ment For:	99210 2012 General	Cateo	gory/			t of E	ach I	Disbu		-	_	i
c.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05	ment For:	99210 2012 General	Cateo	gory/		Amoun Date o	t of E	ach I	Disbu	rseme	100	0.00	d
<u> </u>	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial)	ment For:	99210 2012 General	Cateo	gory/		Amoun	t of E	ach I	Disbu	rseme	-	0.00	d
c .	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS	ment For:	99210 2012 General	Cateo	gory/		Amoun Date o	t of E	urser	Disbu	rseme	100 Y	0.00	d
с.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308	ment For:	99210 2012 General	Cateo	gory/		Date o	t of E	urser	ment	rseme	100 Y	0.00	1
с.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS	wa nent For: Primary Other (spe	99210 2012	Cateo	gory/		Date o	t of E	urser	ment	rseme	100 Y	0.00	d
c.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement	ment For: Primary Other (spe	99210 2012 General cify) Zip Code	Cateo	gory/		Date o	t of E	urser	ment	rseme	100 Y	0.00	d
C .	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates	ment For: Primary Other (spe	99210 2012 General cify) Zip Code	Cateo	gory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	0.00	
C.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name	ment For: Primary Other (spe	99210 2012 General cify) Zip Code	Category, Typ.	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	v Perioc	
c.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns	ment For: Primary Other (spe	99210 2012	Categ Typ	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	v Perioc	
C.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Disbursement	ment For: Primary Other (spe	99210 2012	Category, Typ.	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	v Perioc	
C.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Senate Disbursement Candidate Name Rep. Cliff Stearns	ment For: Primary Other (spe	99210 2012	Category, Typ.	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	v Perioc	
c.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Senate President Disbursement Candidate Name Rep. Cliff Stearns Office Sought: House Senate President	ment For: Primary Other (spe	99210 2012	Category, Typ.	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	v Perioc	
C.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Senate Disbursement Candidate Name Rep. Cliff Stearns	ment For: Primary Other (spe	99210 2012	Category, Typ.	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	v Perioc	
c.	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Senate President Disbursement Candidate Name Rep. Cliff Stearns Office Sought: House Senate President	ment For: Primary Other (spe	99210 2012	Category, Typ.	ggory/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012 nt this	Period	
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Senate President Disbursement Candidate Name Rep. Cliff Stearns Office Sought: House Senate President	ment For: Primary Other (spe	99210 2012	Categ Typ	1 1 gggry/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012	Period	
	Spokane Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cathy McMorris Rodgers Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS Mailing Address PO BOX 308 City SILVER SPRINGS Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Cliff Stearns Office Sought: House Senate President Senate President State: FL District: 06	ment For: Primary Other (spe	99210 2012	Categ Typ	1 1 gggry/ pe		Date o	f Disb	urser	ment : D13	3883	100 2012 nt this	Period	

SCHEDULE B (FEC Form 3		, FOR LINE	NUMBER: PAGE 199 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(oricon oring	
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Paparts	and Statements may not be cold or u		on for the purpose of soliciting contributions
or for commercial purposes, other than usin			
NAME OF COMMITTEE (In Full)			
National Emergency Medicion	ne Political Action Commi	ttee	
Full Name (Last, First, Middle Initial)			Data of Bishamoural
A. GARDNER FOR CONGRES	SS		Date of Disbursement
Mailing Address PO Box 2408			06 21 2012
City	State Zip Code		Transaction ID : D134226
Loveland	CO 80539		Transaction ib . D134220
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Cory Gardner Office Sought: House	Disbursement For: 2012	Туре	, , , , ,
Senate President	Primary General Other (specify)		
State: CO District: 04			
Full Name (Last, First, Middle Initial)	E00		Data of Dishursement
B. DAVE CAMP FOR CONGR	E55		Date of Disbursement
Mailing Address 20 F St NW Ste 500			05 09 2012
City Washington	State Zip Code DC 20001-6703		Transaction ID : D128122
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Dave Camp	Dishuraement Form again	Туре	2500.00
Office Sought: House Senate President	Disbursement For: 2012 Primary		
Full Name (Last, First, Middle Initial)	EDT		Data of Dishura-wast
c. FRIENDS OF DAVE REICH	EKI		Date of Disbursement
Mailing Address P. O. Box 53322			06 13 2012
City Bellevue	State Zip Code WA 98015		Transaction ID : D133881
Purpose of Disbursement			
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Dave Reichert Office Sought: House	Disbursement For: 2012	Туре	7 7
Senate President	Primary General Other (specify)		
State: WA District: 08			
SUBTOTAL of Disbursements This Page (optional)	·····•	5500.00
TOTAL This Period (last page this line nur	nber only)	·····	

SCF	IEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 200 OF 227
ITE	MIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
		Detailed Summary Page	21b 27		24 25 26 28c 29 30b
Any i	nformation copied from such Reports and Statem	lents may not be sold or us			
	commercial purposes, other than using the nam				
N/	AME OF COMMITTEE (In Full)				
/	lational Emergency Medicine Polit	ical Action Commit	tee 		
_	III Name (Last, First, Middle Initial)			Date of District	
A. S	CHWEIKERT FOR CONGRESS			Date of Disbursement	
Ma	ailing Address 8776 E SHEA BLVD, SUITE B3A-6	26		05 16	2012
Ci	ty	State Zip Code		Transaction ID : D12	9764
	COTTSDALE	AZ 85260		Transaction ID : D12	0/04
C	urpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbu	rsement this Period
	andidate Name		Category/		1000.00
	ep. David Schweikert fice Sought:	nent For: 2012	Type	7	,
Oi	Senate	Primary General Other (specify) ▼			
	ate: AZ District: 05				
	III Name (Last, First, Middle Initial)			D (D)	
В. L	AMBORN FOR CONGRESS			Date of Disbursement	
Ma	ailing Address P.O. BOX 64107			06 28	2012
Ci	•	State Zip Code CO 80962		Transaction ID : D13	4512
	rpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbu	rsement this Period
Ca	andidate Name		Category/		
	Rep. Doug Lamborn		Type		1000.00
Of		nent For: 2012			
		Primary General			
St	ate: CO District: 05	Other (specify) ▼			
	ıll Name (Last, First, Middle Initial)				
_	LUMENAUER FOR CONGRESS			Date of Disbursement	
				M M / D D /	Y Y Y Y Y
Ma	ailing Address 830 NE Holladay, #105			06 13	2012
Ci	ty S	State Zip Code			
Po	ortland	OR 97232		Transaction ID : D13	3892
	urpose of Disbursement Contributions for Federal Candidates		1		
_	andidate Name		011	Amount of Each Disbu	rsement this Period
	Rep. Earl Blumenauer		Category/ Type		2500.00
		nent For: 2012	Type	7	7
		Primary Seneral			
		Other (specify) ▼			
St	ate: OR District: 03				
					4500.00
SUB	BTOTAL of Disbursements This Page (optional)		·····		4500.00
TO-	Al This David /last page this line much a set A				
1 101	AL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 201			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	04 🗆 ===================================		
	Detailed Summary Page	21b 27		24 25 26 28c 29 30b	
Annintermenting against them such Bornards and Chale					
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
National Emergency Medicine Pol	itical Action Committ	ee			
Full Name (Last, First, Middle Initial)					
A. PERLMUTTER FOR CONGRESS			Date of Disbursement		
Mailing Address 3440 Youngfield Street			05 09	2012	
City	State Zip Code		Transaction ID - D4:	204.22	
Wheat Ridge	CO 80033		Transaction ID : D12	28132	
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disb	ursement this Period	
Candidate Name		Category/		1000.00	
Rep. Ed Perlmutter Office Sought: House Disburse	ment For: 2012	Туре		7	
Senate President	Primary General Other (specify) ▼				
State: CO District: 07					
Full Name (Last, First, Middle Initial)					
B. PERLMUTTER FOR CONGRESS			Date of Disbursement		
Mailing Address 3440 Youngfield Street			06 27	2012	
City Wheat Ridge	State Zip Code CO 80033		Transaction ID : D1	34481	
Purpose of Disbursement VOID CK 8232 6/27/12			Amount of Each Disb	ursement this Period	
Candidate Name		Category/			
Rep. Ed Perlmutter		Type		-1000.00	
	ment For: 2012 Primary General Other (specify) ▼		VOID CK 8232 6/27/12	2	
Full Name (Last, First, Middle Initial)					
C. FRIENDS OF ERIK PAULSEN			Date of Disbursement		
Mailing Address P.O. Box 44369			05 / D D D	2012	
City	State Zip Code		Transaction ID : D1	20101	
Eden Prairie	MN 55344		Transaction iD : D1.	23101	
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disb	uraamant this Davied	
Candidate Name		Category/	Amount of Each Disb	ursement this Period	
Rep. Erik Paulsen		Type		1000.00	
Senate President	ment For: 2012 Primary ☐ General Other (specify) ▼		,		
State: MN District: 03					
SUBTOTAL of Disbursements This Page (optional).		······		1000.00	
TOTAL This Period (last page this line number only	·)				

SCHEDULE B (FEC Form 3X)	FOR LINE NUMBER: PAGE 202			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	ments may not be sold or us			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
National Emergency Medicine Pol	itical Action Committ	ee		
Full Name (Last, First, Middle Initial)				
A. UPTON FOR ALL OF US			Date of Disbursem	nent
Mailing Address 104 Hume Avenue			06 13	2012
City	State Zip Code		: IS	D.4.0.0.0.0
Alexandria	VA 22301		Transaction ID:	D133889
Purpose of Disbursement Contributions for Federal candidates		011	Amount of Each D	sisbursement this Period
Candidate Name		Category/		2000.00
Rep. Fred Upton	was the second	Type		2000.00
Senate President	ement For: 2012 Primary General Other (specify)			
State: MI District: 06				
Full Name (Last, First, Middle Initial)			Data of Disharasa	
B. JACKIE SPEIER FOR CONGRES	55		Date of Disbursem	
Mailing Address Post Office Box 112			05 24	2012
City Burlingame	State Zip Code CA 94011		Transaction ID :	D129086
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		1000.00
Rep. Jackie Speier		Type		1000.00
Office Sought: House Disburse	ement For: 2012 Primary			
Full Name (Last, First, Middle Initial)				
C. FRIENDS OF JIM CLYBURN			Date of Disbursem	nent
			M M / D D	
Mailing Address PO BOX 12567			06 06	2012
City	State Zip Code		Transaction ID :	D133725
COLUMBIA Purpose of Disbursement	SC 29211			
Contributions for Federal Candidates		011	Amount of Each D	isbursement this Period
Candidate Name		Category/	Amount of Lacif B	
Rep. James E. Clyburn		Type		1500.00
Senate President	ement For: 2012 Primary General Other (specify)		,	
State: SC District: 06				
SUBTOTAL of Disbursements This Page (optional).		·····	-	4500.00
TOTAL This Period (last page this line number only	/)			

SCHEDULE B (FEC Form 3X)	Lico congreto cohodula(a)	PAGE			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30	
Any information copied from such Reports and Statem					
or for commercial purposes, other than using the name	ne and address of any politi	cai committee to	solicit contributions fro	m such committee.	
NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Action Commit	tee			
Full Name (Last, First, Middle Initial)			Date of Disburseme		
A. CITIZENS FOR ALTMIRE			Date of Disburseme	nt	
Mailing Address P.O. Box 1776			06 07	2012	
	State Zip Code		Transaction ID : D	133759	
Freedom Purpose of Disbursement	PA 15042		Hansacton ib . b		
VOID CK 8188 4/25/12		· · ·	Amount of Each Dis	bursement this Period	
Candidate Name		Category/		4000.00	
Rep. Jason Altmire		Type		-1000.00	
Senate	nent For: 2012 Primary General		VOID CK 8188 4/25/	12	
	Other (specify) ▼				
State: PA District: 04 Full Name (Last, First, Middle Initial)					
B. CITIZENS FOR ALTMIRE			Date of Disburseme	nt	
OTTIZENOT ON ALTIMINE			M M / D D	/ Y Y Y Y	
Mailing Address P.O. Box 1776			04 25	2012	
,	State Zip Code		Transaction ID : D	127765	
Freedom Purpose of Disbursement	PA 15042				
Contributions for Federal Candidates		011	Amount of Each Dis	bursement this Period	
Candidate Name		Category/		4000.00	
Rep. Jason Altmire		Type		1000.00	
Senate President	nent For: 2012 Primary General Other (specify)				
State: PA District: 04					
Full Name (Last, First, Middle Initial) C. JESSE JACKSON JR FOR CONGI	RESS		Date of Disburseme		
Mailing Address P.O. Box 490286			06 13	2012	
,	State Zip Code		Transaction ID : D	133893	
Chicago Purpose of Disbursement	IL 60649				
Contributions for Federal Candidates		011	Amount of Each Dis	bursement this Period	
Candidate Name		Category/		1000.00	
Rep. Jesse L. Jackson Jr. Office Sought: House Disburser	nent For: 2012	Туре		1000.00	
Senate President	nent For: 2012 Primary				
State: IL District: 02					
SUBTOTAL of Disbursements This Page (optional)		·····•	-	1000.00	
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 204 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Criccit Orliy	
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Sta	tements may not be sold or us		
or for commercial purposes, other than using the r			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Po	olitical Action Commit	tee	
Full Name (Last, First, Middle Initial)			
A. MATHESON FOR CONGRESS			Date of Disbursement
Mailing Address P.O. BOX 521048			06 21 2012
City	State Zip Code		Transaction ID : D134218
SALT LAKE CITY	UT 84152		Transaction id . D134216
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Jim Matheson Office Sought: House Disbur	sement For: 2012	Туре	
Senate President	Primary ☐ General Other (specify) ▼		
State: UT District: 02			
Full Name (Last, First, Middle Initial)			Data of Dishuraament
B. COURTNEY FOR CONGRESS			Date of Disbursement
Mailing Address 38 Risley Road			05 09 2012
City Vernon	State Zip Code CT 06066		Transaction ID : D128120
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Joe Courtney		Туре	2500.00
	sement For: 2012 ✓ Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. CONGRESSMAN JOE BARTON	COMMITTEE, THE		Date of Disbursement
Mailing Address P.O. Box 1444			05 09 2012
City Ennis	State Zip Code TX 75120		Transaction ID : D128129
Purpose of Disbursement			
Contributions for Federal Candidates			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Joe L. Barton Office Sought: House Disbur	sement For: 2012	Туре	1000.00
State: TX District: 06	Primary General Other (specify)		
Cidato. 17. Biotriot. 00			
SUBTOTAL of Disbursements This Page (optional	l)	<u> </u>	6000.00
TOTAL This Period (last page this line number or	nly)	·····	

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PA	AGE 205 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 24 28a 28b 28c	25 26 29 30b
[
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	aaa.ooo or arry pointed		22 22	
National Emergency Medicine Politi	cal Action Committe	26		
/ Ivalional Emergency Medicine Folia	cai / ction committe			
Full Name (Last, First, Middle Initial)				
A. LARSON FOR CONGRESS			Date of Disbursement	
Mailing Address 330 Main Street			06 21	2012
430 South Capitol Street, SE			00 21	2012
	ate Zip Code		T	•
	CT 06106		Transaction ID: D1342	J6
Purpose of Disbursement Contributions for Federal Candidates		044		
Candidate Name		011	Amount of Each Disburse	ement this Period
Rep. John B. Larson		Category/ Type		1500.00
	ent For: 2012	1,400	7	
	Primary Seneral			
	Other (specify) ▼			
State: CT District: 01				
Full Name (Last, First, Middle Initial)			D : (D:)	
B. CULBERSON FOR CONGRESS			Date of Disbursement	
Mailing Address P.O. Box 41964			06 21	2012
Mailing Address P.O. Box 41904			00 21	2012
	ate Zip Code		Transaction ID : D1342	ns
- 10 10 10 10 10 10 10 10 10 10 10 10 10	ΓX 77241		Transaction ib . b1342	00
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disburse	ment this Period
Candidate Name			Amount of Lacif Disburse	ment this Fenou
Rep. John Culberson		Category/ Type		1000.00
	ent For: 2012		,	
	Primary General			
	Other (specify) ▼			
State: TX District: 07				
Full Name (Last, First, Middle Initial)	2.14.0		Date of Disbursement	
c. JOHN SULLIVAN FOR CONGRES	SINC			
Mailing Address Post Office Box 470840			06 13	2012
,	ate Zip Code		Transaction ID : D1338	80
Tulsa Purpose of Disbursement	OK 74147			
Contributions for Federal Candidates		011	Amount of Each Disburse	mont this Pariod
Candidate Name		Category/	Amount of Each Disburse	ment this Penod
Rep. John Sullivan		Type		3000.00
	ent For: 2012		,	
	Primary General			
	Other (specify) ▼			
State: OK District: 01				
SUPTOTAL of Dichuracmenta This Base (antisme)				5500.00
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		
			_	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 206 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Stat	ements may not be sold or us		
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Po	litical Action Commit	tee 	
Full Name (Last, First, Middle Initial)			B (B)
A. CROWLEY FOR CONGRESS			Date of Disbursement
Mailing Address 84-56 GRAND AVENUE			05 09 2012
City	State Zip Code		Transaction ID - D429425
ELMHURST	NY 11373		Transaction ID: D128125
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Joseph Crowley Office Sought: House Disburs	ement For: 2012	Type	
Senate President	Primary General Other (specify) ▼		
State: NY District: 07			
Full Name (Last, First, Middle Initial)			
B. KENNY MARCHANT FOR CONC	GRESS		Date of Disbursement
Mailing Address PO Box 110187			04 25 2012
City Carrollton	State Zip Code TX 75011		Transaction ID : D127754
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Kenny Marchant Office Sought:	oment For: 0040	Туре	1000.00
	ement For: 2012 Primary General		
President	Other (specify)		
State: TX District: 24			
Full Name (Last, First, Middle Initial) C. KISSELL FOR CONGRESS			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 1530			06 13 2012
City	State Zip Code		Transaction ID - D422882
BISCOE	NC 27209		Transaction ID: D133882
Purpose of Disbursement Contributions for Federal Candidates		011	
Candidate Name			Amount of Each Disbursement this Period
Rep. Larry Kissell		Category/ Type	1000.00
•	ement For: 2012 Primary General Other (specify)	Nr	
State: NC District: 08	·		
SUBTOTAL of Disbursements This Page (optional)			6000.00
TOTAL This Period (last page this line number on	y)	·····	

S	CHEDULE B (FEC Form 3X)	lla	anaka anda adada ()	FOR LINE	NUMBER:		PAGE	207 C	F 227
IT	EMIZED DISBURSEMENTS		parate schedule(s) a category of the	(check only		▽ 22 「		_ 0E	
			Summary Page	21b	22 28a	X 23 28b	24 28c	25 29	26 30b
Δr	y information copied from such Reports and Staten	nents may	not be sold or us						
	for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full)								
$ \rangle$	National Emergency Medicine Polit	tical Ac	tion Commit	tee					
_	Full Name (Last, First, Middle Initial)								
Α.	FRIENDS OF LOIS CAPPS				Date of	Disbursem			
	Mailing Address 38 Ivy Street, SE				05	09		012	Y
	City	State	Zip Code		Trans	action ID :	D128135		
	Washington	DC	20003		ITalis	action ib .	D120133		
	Purpose of Disbursement Contributions for Federal Candidates			011	Amoun	of Each D)isbursemen	t this P	eriod
	Candidate Name			Category/				1500.	00
	Rep. Lois Capps Office Sought: House Disbursen	nent For:	2010	Туре		7	7	1000.	.00
	Office Sought: House Disbursen Senate	Primary	General						
	President	Other (spe							
	State: CA District: 24								
_	Full Name (Last, First, Middle Initial)								
В.	LOUISE SLAUGHTER RE-ELECT	ION CO	DMMITTEE		Date of	Disbursem	nent		
	Mailing Address P.O. Box 730				05	24		2012	Y
	City	State	Zip Code		Trans	action ID :	D120000		
	Honeoye	NY	14471		IIalis	action iD .	D129099		
	Purpose of Disbursement Contributions for Federal Candidates			011	Amoun	of Each D)isbursemen	t this P	eriod
	Candidate Name			Category/				1000	00
	Rep. Louise M. Slaughter			Туре		-		1000	.00
		nent For:							
		Primary Other (spe	General						
	State: NY District: 28	(-)	√						
	Full Name (Last, First, Middle Initial)								
C.	MICHAUD FOR CONGRESS				Date of	Disbursem	nent		
	Mailing Address 213 Lisbon St				M M M	/ D D D		012	Υ
	Walling Address 213 Lisbon St				04	20		012	
	City	State	Zip Code		Trans	action ID :	D127769		
	Lewiston Purpose of Disbursement	ME	04240		TTUTTS		2121100		
	Contributions for Federal Candidates			011	A	of Food F)isbursemen	t thin [) o vi o d
	Candidate Name			Category/	Amoun	OI Each L	nsbursemen	t triis P	renod
	Rep. Michael H. Michaud			Type				1500.	.00
		nent For:	2012				,		
	Senate	Primary	General						
	State: ME District: 02	Other (spe	ecity) 🔻						
	State: ME District: 02								
s	UBTOTAL of Disbursements This Page (optional)					/AD.		4000.	00
								-	-
T	OTAL This Period (last page this line number only)			·····		- 1	7		

SCHEDULE B (FEC F		lse sen	arate schedule(s)			UMBER:		PA	GE 208	OF 227
ITEMIZED DISBURSEN	IEN 15	or each	category of the	(cnec	k only o	one) 22	X 23	24	25	<u> </u>
	[Detailed	Summary Page		27	28a	28b	28c	29	30b
Any information copied from such	Reports and Statemen	nts may	not be sold or us	ed by any	persor	for the	purpose	of solicitin	g contribu	tions
or for commercial purposes, other		and add	iress of any politic	al commit	tee to s	SOlicit coi	ntributions	from suc	n commit	tee.
NAME OF COMMITTEE (In Full National Emergency I	•	ച മപ	ion Committ	00						
/		ai 7 toi								
Full Name (Last, First, Middle In	•					Data of	Disburse	mont		
A. MIKE MCINTYRE FO	R CONGRESS)				M M	/ D		YY	V
Mailing Address P.O. Box 1						06	0		2012	
City	Stat	te	Zip Code			Trans	aatian ID	. D42272	<u> </u>	
Lumberton	NO		28359			irans	action ib	: D13372	2	
Purpose of Disbursement Contributions for Federal Candid	dates			011		Amount	of Fach	Disburser	ment this	Period
Candidate Name				Categor	2//	7		2.000.00.		
Rep. Mike McIntyre				Type	у,				1000).00
Office Sought: House	Disbursemen									
Senate Presider		mary her (spe	General							
State: NC District: 07		(-	, , , , , , , , , , , , , , , , ,							
Full Name (Last, First, Middle In	,									
B. NANCY PELOSI FOR	R CONGRESS					Date of	Disburse	ement		
Mailing Address 607 14th Stree	et NW					06		6 / Y	2012	Y
City Washington	Stat DC		Zip Code 20005			Trans	action ID	: D13372	7	
Purpose of Disbursement			20003		_					
•				011		Amount	t of Each	Disburser	ment this	Period
Contributions for Federal Candi	dates									
Candidate Name	dates			Categor	y/				250	0.00
Candidate Name Rep. Nancy Pelosi		nt For:	2012	Categor Type	ry/	L.	-	,	250	0.00
Candidate Name	Disbursemen	nt For:	2012 General		ry/		-		250	0.00
Candidate Name Rep. Nancy Pelosi Office Sought: House Senate Presider	Disbursemen Pri	mary			ry/	L.	-		250	0.00
Candidate Name Rep. Nancy Pelosi Office Sought: House Senate Presider State: CA District: 0	Disbursemen Pri Ott	mary	X General		ry/	L.		7	250	0.00
Candidate Name Rep. Nancy Pelosi Office Sought: House Senate Presider State: CA District: 06 Full Name (Last, First, Middle In	Disbursemen Pri Ott	mary her (spe	General vicify) ▼		y/	Date of	f Disburse	ement	250	0.00
Candidate Name Rep. Nancy Pelosi Office Sought: House Senate Presider State: CA District: 0	Disbursemen Pri Ott	mary her (spe	General vicify) ▼		y/	Date of	f Disburse		250	
Candidate Name Rep. Nancy Pelosi Office Sought: House Senate Presider State: CA District: 06 Full Name (Last, First, Middle In	Disbursemen Pri Ott 8 nitial) GRESSIONAL	mary her (spe	General vicify) ▼				/ D			
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON	Disbursemen Pri Ott 8 nitial) GRESSIONAL	mary her (spe	General vicify) ▼		ny/	05	/ D	D / Y	y y 2012	
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK	Disbursemen Pri Ott 8 nitial) GRESSIONAL	mary her (spe	General ecify) MITTEE		y/	05	/ D	D / Y	y y 2012	
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175	Disbursemen Pri Ott R GRESSIONAL Stat TX	mary her (spe	General cify) MITTEE Zip Code	Туре	y/	05	0 action ID	: D12795	^Y 2012	Y
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement	Disbursemen Pri Ott R GRESSIONAL Stat TX	mary her (spe	General cify) MITTEE Zip Code	Type 011		05	0 action ID	D / Y	2012 8 ment this	Y
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement Contributions for Federal Candidate Name Rep. Randy Neugeba	Disbursement Pri Ottl 8 States	mary her (spe	General scify) MITTEE Zip Code 79453	Туре		05	0 action ID	: D12795	^Y 2012	Y
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement Contributions for Federal Candidate Name Rep. Randy Neugeba Office Sought: House	Disbursemen Pri Ott Residence Ott Residence Ott Residence Ott Ott Ott Ott Ott Ott Ott O	COM te	General cify) MITTEE Zip Code 79453	Type 011 Categor		05	0 action ID	: D12795	2012 8 ment this	Y
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement Contributions for Federal Candidate Name Rep. Randy Neugeba	Disbursement Ottl 8 Initial) GRESSIONAL 5 Stat TX dates Disbursemer Pri	COM te	General scify) MITTEE Zip Code 79453	Type 011 Categor		05	0 action ID	: D12795	2012 8 ment this	Y
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement Contributions for Federal Candid Candidate Name Rep. Randy Neugeba Office Sought: House Senate	Disbursement 8 nitial) GRESSIONAL Stat TX dates Disbursement Pri Ott Ott Ott Ott Ott Ott Ott Ott Ott Ot	COM te	General cify) MITTEE Zip Code 79453	Type 011 Categor		05	0 action ID	: D12795	2012 8 ment this	Y
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement Contributions for Federal Candid Candidate Name Rep. Randy Neugeba Office Sought: House Senate Presider State: TX District: 19	Disbursement Ottl 8 nitial) GRESSIONAL 5 Stat TX dates Disbursement Pri Ottl 9	COM te mary her (spe	General cify) MITTEE Zip Code 79453 2012 General cify) General cify)	O11 Categor Type	y/	05	0 action ID	: D12795	2012 8 ment this	Period 0.00
Candidate Name Rep. Nancy Pelosi Office Sought: State: CA Full Name (Last, First, Middle In NEUGEBAUER CON) Mailing Address PO BOX 54175 City LUBBOCK Purpose of Disbursement Contributions for Federal Candidate Name Rep. Randy Neugeba Office Sought: House Senate Presider	Disbursement Ottl 8 nitial) GRESSIONAL 5 Stat TX dates Disbursement Pri Ottl 9	COM te mary her (spe	General cify) MITTEE Zip Code 79453 2012 General cify) General cify)	O11 Categor Type	y/	05	0 action ID	: D12795	2012 8 ment this	Period 0.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 209 OF 227
TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orling	· · · · · · · · · · · · · · · · · · ·
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30b
Assistance in a second form and December and Obstance			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	, , ,		
National Emergency Medicine Polit	ical Action Commi	ttee	
Full Name (Last, First, Middle Initial)			D
A. RENEE ELLMERS FOR CONGRE	SS COMMITTEE		Date of Disbursement
Mailing Address P.O. Box 904			05 02 2012
g			2 22.2
City	State Zip Code		Transaction ID : D127967
Dunn Chickenson	NC 28335		Transaction ib . D127307
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Disbursement this Feriou
Rep. Renee Ellmers		Category/ Type	1000.00
	nent For: 2012		
	Primary General		
	Other (specify) ▼		
State: NC District: 02			
Full Name (Last, First, Middle Initial) B. RICHARD E NEAL FOR CONGRE	SS COMMITTEE		Date of Disbursement
- RICHARD E NEAET OR CONGRE	.33 COMMITTEE		M M / D D / Y Y Y Y
Mailing Address 76 MAGNOLIA TERRACE			04 11 2012
City S SPRINGFIELD	State Zip Code MA 01108		Transaction ID : D127337
Purpose of Disbursement	01100		
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Richard E. Neal		Туре	1000.00
	nent For: 2012		
	Primary General Other (specify) ▼		
State: MA District: 02	€ inc. (opeony) •		
Full Name (Last, First, Middle Initial)			
C. RICHARD E NEAL FOR CONGRE	SS COMMITTEE		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 76 MAGNOLIA TERRACE			06 21 2012
City	State Zip Code		
,	MA 01108		Transaction ID: D134225
Purpose of Disbursement Contributions for Federal Candidates			
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Richard E. Neal		Category/ Type	1000.00
•	nent For: 2012	туре	
	Primary Seneral		
President	Other (specify)		
State: MA District: 02			
			3000 00
State: MA District: 02 SUBTOTAL of Disbursements This Page (optional)		>	3000.00

S	CHEDULE B (FEC Form 3X)				NUMBER:		PAG	E 210 C)F 227
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check on		X 23	24	25	<u>26</u>
		Detailed	Summary Page	27	28a	28b	28c	29	30b
Aı	ny information copied from such Reports and Statem	nents may	not be sold or use	ed by any per	son for the	purpose of	soliciting	contribut	ions
	for commercial purposes, other than using the nam								
\setminus	NAME OF COMMITTEE (In Full)								
	National Emergency Medicine Polit	tical Act	tion Committe	ee					
	Full Name (Last, First, Middle Initial)								
Α.	CITIZENS TO ELECT RICK LARSI	EN			Date of	f Disbursem	nent		
	Mailing Address PO Box 326				06	13	/ Y	2012	Y
	,	State WA	Zip Code 98206		Trans	action ID :	D133895		
	Purpose of Disbursement	• • • • • • • • • • • • • • • • • • • •	90200		-				
	Contributions for Federal Candidates			011	Amoun	t of Each D	isbursem	ent this F	Period
	Candidate Name			Category/				1000	00
	Rep. Rick Larsen			Туре		7	7	1000	.00
		nent For: Primary	2012 General						
		Other (spe							
	State: WA District: 02	(- -	- 3 <i>)</i>						
	Full Name (Last, First, Middle Initial)								
В.	ROB WITTMAN FOR CONGRESS	3			Date of	f Disbursem	nent		
	Mailing Address D.O. DOV 000				06	/ D D	/ Y	2012	Y
	Mailing Address P.O. BOX 999				06	06	_	2012	
	City	State	Zip Code		Trans	saction ID :	D133718		
		1 / A							
		VA	22520		-				
	MONTROSS Purpose of Disbursement Contributions for Federal Candidates	VA	22520	011	Amoun	t of Each D	isbursem	ent this F	Period
	Purpose of Disbursement	VA	22520		Amoun	t of Each D	isbursem		
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman			011 Category/ Type	Amoun	t of Each D	isbursem	ent this F 2500	
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: House Disbursem	nent For:	2012	Category/	Amoun	t of Each D	isbursem		
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: Y House Disbursem Senate	nent For: Primary	2012 General	Category/	Amoun	t of Each D	isbursem		
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: House Senate Disbursem	nent For:	2012 General	Category/	Amoun	t of Each D	isbursem		
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: House Disbursement Candidates Candidate Candidate	nent For: Primary	2012 General	Category/	Amoun	t of Each D	isbursem		
C.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: House Disbursement Candidates Candidate Candidate	nent For: Primary	2012 General	Category/		t of Each D	7		
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS	nent For: Primary	2012 General	Category/	Date o	f Disbursem	nent	2500 Y Y	.00
<u> </u>	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial)	nent For: Primary	2012 General	Category/	Date o	f Disbursem	nent	2500	.00
<u> </u>	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145	nent For: Primary	2012 General	Category/	Date o	f Disbursem	nent / Y	2500 Y 2012	.00
С.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City S NORTHFIELD	nent For: Primary Other (spe	2012 General	Category/	Date o	f Disbursem	nent / Y	2500 Y 2012	.00
C.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code	Category/	Date o	f Disbursem / 25 saction ID :	nent / Y	2500 Y Y 2012	.00
с.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code	Category/ Type	Date o	f Disbursem	nent / Y	y y 2012	.00 Period
С.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold	nent For: Primary Other (spe	Zip Code 60093	Category/ Type	Date o	f Disbursem / 25 saction ID :	nent / Y	2500 Y Y 2012	.00 Period
c.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Disbursement	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 60093	Category/ Type 011 Category/	Date o	f Disbursem / 25 saction ID :	nent / Y	y y 2012	.00 Period
C.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate Disbursement Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 60093 2012 General	Category/ Type 011 Category/	Date o	f Disbursem / 25 saction ID :	nent / Y	y y 2012	.00 Period
C .	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 60093 2012 General	Category/ Type 011 Category/	Date o	f Disbursem / 25 saction ID :	nent / Y	y y 2012	.00 Period
c.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 60093 2012 General	Category/ Type 011 Category/	Date o	f Disbursem / 25 saction ID :	nent / Y	y y 2012	.00 Period
C.	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President	nent For: Primary Other (spe	Zip Code 60093 Zip Code 60093 General	Category/ Type 011 Category/ Type	Date o	f Disbursem / 25 saction ID :	nent / Y	y y 2012	Period
	Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Rob Wittman Office Sought: State: VA District: 01 Full Name (Last, First, Middle Initial) DOLD FOR CONGRESS Mailing Address PO BOX 8145 City NORTHFIELD Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Robert Dold Office Sought: House Senate President State: IL District: 10	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 60093 2012 General cify) ▼	Category/ Type 011 Category/ Type	Date o	f Disbursem / 25 saction ID :	nent / Y	2500 2012 ent this F	Period

SCHEDULE B (FEC Form 3X)	Hoo concrete cated	.la/a\	INE NUMBER:	PAGE 211 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary P	the Concor	conly one) 21b 22 X 23 2 27 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	le and address of any	political committ	ee to solicit contributions if	rom such committee.
National Emergency Medicine Polit	ical Action Com	mittee		
Full Name (Last, First, Middle Initial) A. FRIENDS OF ROSA DELAURO			Date of Disbursem	ent
" FRIENDS OF ROSA DELAURO			M M / D D	
Mailing Address 12 TRUMBULL STREET			06 27	2012
City	State Zip Code			
NEW HAVEN	CT 06511		Transaction ID :	D134477
Purpose of Disbursement VOID CK 7778 6/27/12			Amount of Each D	isbursement this Period
Candidate Name		Category		
Rep. Rosa DeLauro		Type	,	-1000.00
	nent For: 2012 Primary ☐ Gene Other (specify) ▼	eral	VOID CK 7778 6/27	7/12
State: CT District: 03				
Full Name (Last, First, Middle Initial)			5 . (5:1	
B. GRAVES FOR CONGRESS			Date of Disbursem	
Mailing Address 2345 Grand, Suite 2400			05 24	2012
City	State Zip Code		Transaction ID :	D129109
Kansas City Purpose of Disbursement	MO 64108			D120100
Contributions for Federal Candidates		011	Amount of Each D	isbursement this Period
Candidate Name		Category	y/	1000.00
Rep. Sam Graves	. =	Type		1000.00
Senate	nent For: 2012 Primary	eral		
Full Name (Last, First, Middle Initial) C. LEVIN FOR CONGRESS			Date of Disbursem	ent
Mailing Address PO Box 37			05 / 24	2012
City	State Zip Code		IS	D.400.400
Roseville	MI 48066		Transaction ID :	129103
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each D	isbursement this Period
Candidate Name		Category		
Rep. Sander M. Levin		Type		1000.00
Senate	nent For: 2012 Primary ☐ Gene Other (specify) ▼	eral		
			· · · · · ·	1000.00
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	1000.00
TOTAL This Period (last page this line number only)				

	CHEDULE B (FEC Form 3X)	Use sen	arate schedule(s)			UMBER:		PA	AGE 212	OF 227	_
IT	EMIZED DISBURSEMENTS	for each	category of the	(cneck	only o	one) 22	X 23	24	25	<u> </u>	
		Detailed	Summary Page		27	28a	28b	28c	29	30	b
	ny information copied from such Reports and Statem										
or	for commercial purposes, other than using the name	ne and add	ress of any politic	cai committ	tee to s	SOIICIT COI	ntribution	s from su	cn comn	nittee.	_
	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	tical Act	ion Committ	·ee							
/	G ,										
Α.	Full Name (Last, First, Middle Initial)	CONCE) FCC			Date of	Disburs	amant			
٦.	SHELLEY MOORE CAPITO FOR (CONGR	(ESS			M M	/ D		Y	· · ·	
	Mailing Address P.O. Box 11519					04		1	2012		
	City	State	Zip Code			Trans	action IF) : D1273	12		_
		WV	25339			IIalis	action iL	. DIZI3	+3		
	Purpose of Disbursement Contributions for Federal Candidates			011		Amount	of Each	Disburse	ment thi	s Period	
	Candidate Name			Category	v/	-					
	Rep. Shelley Moore Capito			Type	y,		7		25	00.00	
		nent For: : Primary									
	President	Other (spe	General cify) ▼								
	State: WV District: 02	· · ·	37 V								
	Full Name (Last, First, Middle Initial)										
В.	TIM BISHOP FOR CONGRESS						Disburs	ement			
	Mailing Address PO Box 437					05	1	02	2012		
	,	State NY	Zip Code 11738			Trans	action II) : D1279	63		
	Farmingville Purpose of Disbursement	State NY	Zip Code 11738		_	Trans	action II) : D1279	63		
	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates			011				Disburse		s Period	
	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name			Category	y/				ement thi	s Period	
	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop	NY	11738		y/				ement thi		
	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Disbursem		11738	Category	y/				ement thi		
	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President Disbursem	NY nent For:	11738 2012 General	Category	y/				ement thi		
	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01	nent For: Primary	11738 2012 General	Category	y/				ement thi		
	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial)	nent For: Primary	11738 2012 General	Category	y/	Amount		Disburse	ement thi		
<u> </u>	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS	nent For: Primary	11738 2012 General	Category	y/	Amount	of Each	Disburse	ement thi	500.00	
C .	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial)	nent For: Primary	11738 2012 General	Category	y/	Amount	of Each	Disburse	ement thi	500.00	
<u>.</u> С.	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437	nent For: Primary	11738 2012 General	Category	y/	Date of	Disburse	Disburse	ement thi	500.00	
C.	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City S Farmingville	nent For: Primary Other (spe	11738 2012	Category	y/	Date of	Disburse	Disburse 2 ement	ement thi	500.00	
c .	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437	nent For: Primary Other (spe	11738 2012	Category	y/	Date of 05	Disburse	Disburse ement 24 2: D1290	2012	900.00 Y	
c.	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Seramingville Purpose of Disbursement	nent For: Primary Other (spe	11738 2012	Category Type		Date of 05	Disburse	Disburse	ement thi	s Period	
C.	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Seramingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 11738	Category		Date of 05	Disburse	Disburse ement 24 2: D1290	ement thi	900.00 Y	
C.	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Disbursement	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 11738	Category Type 011 Category		Date of 05	Disburse	Disburse ement 24 2: D1290	ement thi	s Period	
C.	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate Disbursement Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 11738	Category Type 011 Category		Date of 05	Disburse	Disburse ement 24 2: D1290	ement thi	s Period	
c.	Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Farmingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate Disbursement Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate	nent For: Primary Other (spe	2012 General cify) ▼ Zip Code 11738	Category Type 011 Category		Date of 05	Disburse	Disburse ement 24 2: D1290	ement thi	s Period	
C.	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Seramingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01	nent For: Primary Other (spe	2012 General cify) Zip Code 11738 Zip Code 11738	Category Type 011 Category Type	y/	Date of 05	Disburse	Disburse ement 24 2: D1290	y y y 2012 92 ement thi	s Period 00.00	
C.	Farmingville Purpose of Disbursement Contribtutions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President State: NY District: 01 Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS Mailing Address PO Box 437 City Seramingville Purpose of Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President Disbursement Contributions for Federal Candidates Candidate Name Rep. Timothy H. Bishop Office Sought: House Senate President	nent For: Primary Other (spe	2012 General cify) Zip Code 11738 Zip Code 11738	Category Type 011 Category Type	y/	Date of 05	Disburse	Disburse ement 24 2: D1290	y y y 2012 92 ement thi	s Period	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 213 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
[27	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	, p		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
National Emergency Medicine Poli	tical Action Committ	ee	
/			
Full Name (Last, First, Middle Initial)			Data of Dishurasment
A. PRICE FOR CONGRESS			Date of Disbursement
Mailing Address P.O. Box 425			05 24 2012
	State Zip Code		Transaction ID : D129111
Roswell Purpose of Disbursement	GA 30077		
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Tom Price		Type	1000.00
	nent For: 2012		
	Other (appoint) General		
State: GA District: 06	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. PRICE FOR CONGRESS			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address P.O. Box 425			06 21 2012
City	State Zip Code		
Roswell	GA 30077		Transaction ID: D134215
Purpose of Disbursement			
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name Rep. Tom Price		Category/	2500.00
•	nent For: 2012	Туре	
Senate	Primary Seneral		
President	Other (specify) ▼		
State: GA District: 06			
Full Name (Last, First, Middle Initial)			B (B)
C. BECERRA FOR CONGRESS			Date of Disbursement
Mailing Address P.O. Box 261060			05 02 2012
,	State Zip Code		Transaction ID : D127956
Los Angeles Purpose of Disbursement	CA 90026		
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Xavier Becerra		Type	1500.00
	ment For: 2012		
Senate	Primary General		
State: CA District: 31	Other (specify) ▼		
Side. Of Biotion 31			
SUBTOTAL of Disbursements This Page (optional)			5000.00
continuity.			
TOTAL This Period (last page this line number only)			1

Any or fo	information copied from such Reports and Statem or commercial purposes, other than using the name AME OF COMMITTEE (In Full) National Emergency Medicine Politicul Name (Last, First, Middle Initial) Richard Hanna for Congress	for each Detailed ents may e and add	dress of any polition	cal committee to	22 X 23 24 25 28c 29 con for the purpose of soliciting contributions	26 30b
or fo	or commercial purposes, other than using the name AME OF COMMITTEE (In Full) National Emergency Medicine Politual Name (Last, First, Middle Initial)	e and add	dress of any polition	cal committee to		
F A. F	National Emergency Medicine Polit	ical Ac	tion Commit			i
A. F	•			iee		
N C	Richard Hanna for Congress					
C	lailing Address PO Box 30844				Date of Disbursement O5 24 2012	
	ethesda	tate MD	Zip Code 20824-0844		Transaction ID : D129113	
(urpose of Disbursement Contributions for Federal Candidates			011	Amount of Each Disbursement this Perio	od
F	andidate Name Richard Hanna			Category/ Type	2500.00	
	President	ent For: Primary Other (spe	General			
	tate: NY District: 22					
	ull Name (Last, First, Middle Initial) Ricky Gill for Congress				Date of Disbursement	
N	lailing Address P.O. Box 691900				05 24 2012	
S	stockton	tate CA	Zip Code 95269		Transaction ID: D129128	
_	urpose of Disbursement Contributions for Federal Candidates			011	Amount of Each Disbursement this Perio	od
F	andidate Name Ricky Gill			Category/ Type	2500.00	
		ent For: Primary Other (spe	General			
_	ull Name (Last, First, Middle Initial) Rob Portman for US Senate				Date of Disbursement	
N	lailing Address 900 19th Street, NW 8th Floor				06 28 2012	
	ity	tate DC	Zip Code 20006		Transaction ID : D134513	
	urpose of Disbursement Contributions for Federal Candidates			011	Amount of Each Disbursement this Perio	od
_	andidate Name Rob Portman			Category/ Type	1000.00	
		nent For: Primary Other (spe	General		, , ,	
SU	BTOTAL of Disbursements This Page (optional) TAL This Period (last page this line number only).				6000.00	7

SCHEDULE B (FEC Form 3X)	lise sens	rate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each of	category of the Summary Page	(check only 21b 27	one) 22 X 23 24 25 2 28a 28b 28c 29 3
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) National Emergency Medicine Poli				COLOR SOLVED AND CONTROLLED.
Full Name (Last, First, Middle Initial)				
Rogers For Congress				Date of Disbursement
Mailing Address PO Box 581				05 24 2012
Brighton	State MI	Zip Code 48116		Transaction ID : D129107
Purpose of Disbursement Contributions for Federal Candidates			011	Amount of Each Disbursement this Period
Candidate Name Rep. Michael J. Rogers			Category/ Type	2000.00
Senate President	ment For: 2 Primary Other (spec	Marcal General		
State: MI District: 08 Full Name (Last, First, Middle Initial) Scott Brown for U.S. Senate Comr	mittee			Date of Disbursement
Mailing Address 200 Reservoir St				06 06 2012
City	State	Zip Code		
Needham Heights	MA	02494-3191		Transaction ID : D133717
Purpose of Disbursement Contributions for Federal Candidates			011	Amount of Each Disbursement this Period
Candidate Name			Category/ Type	2500.00
Office Sought: House Senate President State: MA District: 00	ment For: 2 Primary Other (spec	X General		
Full Name (Last, First, Middle Initial) - SCOTT PAC				Date of Disbursement
Mailing Address PO Box 303				04 25 2012
Alexandria	State VA	Zip Code 22313		Transaction ID : D127762
Purpose of Disbursement Contributions for Federal PACs/Committees Candidate Name			011	Amount of Each Disbursement this Period
Candidate Manie			Category/ Type	2000.00
	ment For: 2 Primary Other (spec	General	ıtion	
Office Sought: House Senate President Disburser	Primary Other (spec	General ify) ▼ Annual conntribu		6500.00

		FOR LINE	NUMBER: PAGE 216 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the Detailed Summary Page	(s) (check only	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan		used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	ne and address of any por	mical committee to	Solicit Contributions from Such Contributes.
National Emergency Medicine Poli	tical Action Comm	ittee	
Full Name (Last, First, Middle Initial) A. SEARCHLIGHT LEADERSHIP FU	ND		Date of Disbursement
			M M / D D / Y Y Y Y Y
Mailing Address 426 C St NE			04 25 2012
City Washington	State Zip Code DC 20002-5839		Transaction ID : D127763
Purpose of Disbursement	20002-3039		
Contributions for Federal PACs/Committees Candidate Name		011	Amount of Each Disbursement this Period
Caldidate Name		Category/ Type	5000.00
Office Sought: House Senate President Disburser	ment For: 2012 Primary General Other (specify) ▼		
State: District:	Annual contrib	bution	
Full Name (Last, First, Middle Initial) B. BILL NELSON FOR U S SENATE			Date of Disbursement
Mailing Address 972 W WHITMIRE DRIVE			05 09 2012
MELBOURNE	State Zip Code FL 32935		Transaction ID : D128127
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name Sen. Bill Nelson		Category/ Type	1000.00
	ment For: 2012		
Senate President State: FL District: 00	Primary		
Senate President State: FL District: 00 Full Name (Last, First, Middle Initial)			Date of Disbursement
Senate President State: FL District: 00 Full Name (Last, First, Middle Initial)			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Senate President State: FL District: 00 Full Name (Last, First, Middle Initial) C. DAVID VITTER FOR US SENATE Mailing Address PO BOX 8175 City METAIRIE			M = M / D = D / Y = Y = Y
State: FL District: 00 Full Name (Last, First, Middle Initial) C. DAVID VITTER FOR US SENATE Mailing Address PO BOX 8175 City	Other (specify) ▼ State Zip Code		06 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Senate President State: FL District: 00 Full Name (Last, First, Middle Initial) C. DAVID VITTER FOR US SENATE Mailing Address PO BOX 8175 City METAIRIE Purpose of Disbursement Contributions for Federal Candidates Candidate Name	Other (specify) ▼ State Zip Code	Category/	06 28 2012 Transaction ID : D134514
State: FL District: 00 Full Name (Last, First, Middle Initial) C. DAVID VITTER FOR US SENATE Mailing Address PO BOX 8175 City METAIRIE Purpose of Disbursement Contributions for Federal Candidates Candidate Name Sen. David Vitter Office Sought: House Senate President	Other (specify) ▼ State Zip Code	Category/ Type	Transaction ID: D134514 Amount of Each Disbursement this Period
State: FL District: 00 Full Name (Last, First, Middle Initial) C. DAVID VITTER FOR US SENATE Mailing Address PO BOX 8175 City METAIRIE Purpose of Disbursement Contributions for Federal Candidates Candidate Name Sen. David Vitter Office Sought: House Senate President	Other (specify) State Zip Code LA 70011 ment For: 2016 Primary General Other (specify) Other (specify)	Category/ Type	Transaction ID: D134514 Amount of Each Disbursement this Period

SCHEDULE B (FEC Form 3X)	Has accounts to the Control	FOR LINE	NUMBER: PAGE 217 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orliny	
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Sta	tements may not be sold or u		
or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Po	olitical Action Commit	tee	
Full Name (Last, First, Middle Initial)			Data of Bisham
A. MONTANANS FOR TESTER			Date of Disbursement
Mailing Address PO BOX 1135			06 06 2012
City	State Zip Code		Transaction ID : D133726
HELENA Burnage of Dishursement	MT 59624		Transaction ib . D133720
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Sen. Jon Tester Office Sought: House Disburs	ament Fey 2010	Type	1000.00
Office Sought: House Disburs Senate	ement For: 2012 Primary General		
President	Other (specify) ▼		
State: MT District: 00			
Full Name (Last, First, Middle Initial) B. FRIENDS OF MAX BAUCUS			Date of Disbursement
5. FRIENDS OF MAX BAUCUS			M M / D D / Y Y Y Y
Mailing Address PO BOX 586			06 06 2012
City HELENA	State Zip Code MT 59624		Transaction ID : D133721
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Sen. Max Baucus		Type	1000.00
	ement For: 2014		
Senate President	Primary General Other (specify) ▼		
State: MT District: 00	Carlot (opeony)		
Full Name (Last, First, Middle Initial)			
C. FRIENDS OF MAX BAUCUS			Date of Disbursement
Moiling Address DO DOV FRS			05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 586			05 02 2012
City	State Zip Code		Transaction ID : D127955
HELENA	MT 59624		11a115aCtiO11 ID . D121333
Purpose of Disbursement Contributions for Federal Candidates	Purpose of Disbursement Contributions for Federal Candidates		
Condidate Name		011	Amount of Each Disbursement this Period
Sen. Max Baucus		Category/ Type	1000.00
	sement For: 2014		
X Senate	Primary General		
President	Other (specify) ▼		
State: MT District: 00			
SUBTOTAL of Disbursements This Page (optional)		3000.00
	,		
TOTAL This Period (last page this line number on	ly)	·····	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 218 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information posied from such Departs and Old	amonto move not be sald as as		
Any information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Po	litical Action Commit	tee	
Full Name (Last, First, Middle Initial)			Data of Bishamana
A. PEOPLE FOR PATTY MURRAY			Date of Disbursement
Mailing Address PO BOX 3662			06 07 2012
City	State Zip Code		Transaction ID : D133758
SEATTLE	WA 98124		1141134CUOII ID . D 133736
Purpose of Disbursement VOID CK 8118 3/14/12			Amount of Each Disbursement this Period
Candidate Name		Category/	-1000.00
Sen. Patty Murray Office Sought: House Disburs	ement For: 2016	Туре	
Senate President	Primary General Other (specify) ▼		VOID CK 8118 3/14/12
State: WA District: 00			
Full Name (Last, First, Middle Initial) B. WYDEN FOR SENATE			Date of Disbursement
Mailing Address 232 NE 9TH AVENUE Ste 505			05 09 2012
City PORTLAND	State Zip Code OR 97232		Transaction ID : D128130
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name Sen. Ron Wyden		Category/	1000.00
	ement For: 2016	Туре	
9	Primary General		
President	Other (specify) ▼		
State: OR District: 00			
Full Name (Last, First, Middle Initial) C. CHAMBLISS FOR SENATE			Date of Disbursement
Mailing Address POST OFFICE BOX 12469			04 25 7 2012
City ATLANTA	State Zip Code GA 30355		Transaction ID : D127766
Purpose of Disbursement			
Contributions for Federal Candidates			Amount of Each Disbursement this Period
Candidate Name Sen. Saxby Chambliss		Category/	1000.00
•	ement For: 2014	Туре	
Senate President	Primary General Other (specify) ▼		
State: GA District: 00			
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	1000.00
TOTAL This Period (last page this line number onl	y)	·····•	

SCHEDULE B (FEC Form 3X)	Lien congreto cohodula/a	FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the r			
NAME OF COMMITTEE (In Full)	and address of any point	loar committee to	o delicit contributions from such committee.
National Emergency Medicine Po	olitical Action Commi	ttee	
Full Name (Last, First, Middle Initial)			
A. Stabenow For Us Senate	Stabenow For Us Senate		
Mailing Address PO Box 4945			06 21 2012
City	State Zip Code		Transaction ID : D134209
East Lansing Purpose of Disbursement	MI 48826		
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name Sen. Debbie Stabenow		Category/ Type	2500.00
	sement For: 2012	Туре	
Senate President	Primary		
State: MI District: 00			
Full Name (Last, First, Middle Initial)			
B. Stivers For Congress			Date of Disbursement
Mailing Address 217 3rd St SE			06 06 2012
City	State Zip Code DC 20003-1904		Transaction ID : D133728
Washington Purpose of Disbursement	20003-1904		
Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name Mr. Steve Stivers		Category/ Type	1000.00
	sement For: 2012	Туре	
Senate	Primary General		
President State: OH District: 15	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Strickland for Congress 2012			Date of Disbursement
Mailing Address P. O. Box 368			05 24 2012
City	State Zip Code		Transaction ID - D40000
Falls Church	VA 22040		Transaction ID : D129090
Purpose of Disbursement Contributions for Federal Candidates		010	Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each Disbursement this Fellou
Tony Strickland		Type	2500.00
Office Sought: House Disbur Senate President	sement For: 2012 ✓ Primary General Other (specify) ▼		, , , , , , , , , , , , , , , , , , ,
State: CA District: 26			
SUBTOTAL of Disbursements This Page (optional	l)		6000.00
TOTAL This Period (last page this line number or	าเy)		

SCHEDULE B (FEC Form 3X)		FOD 1 111	NUMBER: PAGE 220 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) FOR LINE (check only	INOMBER.
II LIVIIZED DIGDUNGLIVIEN IG	for each category of the	21b	22 🗙 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30
Any information copied from such Reports and State	ments may not be sold or u	sed by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Pol	itical Action Commit	tee	
Full Name (Leet First Middle 1-22-1)			
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. Tim Murphy For Congress			M M / D D / Y Y Y Y
Mailing Address PO Box 10429			04 25 2012
City	State Zip Code		Transaction ID : D127768
Pittsburgh	PA 15234-0429		
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Disbursement this Period
Candidate Name			, and are the Lagrangian and a filled
Rep. Tim F. Murphy		Category/ Type	1000.00
	ment For: 2012	71	, ,
Senate	Primary		
President	Other (specify) ▼		
State: PA District: 18			
Full Name (Last, First, Middle Initial)			Data of Distance
B. Tim Scott for Congress			Date of Disbursement
Mailing Address 1405 Asley River Road			04 11 2012
Mailing Addition 1400 Asiey River Road			VT 11 2012
City	State Zip Code		Transaction ID : D127344
Charleston	SC 29407		Hallsaction ID . D12/344
Purpose of Disbursement Contributions for Federal Candidates			Amount of Each Dichursoment this Device
Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	1000.00
Office Sought: Y House Disburse	ment For: 2012	1,750	
Senate	Primary General		
President	Other (specify) ▼		
State: SC District: 01			
Full Name (Last, First, Middle Initial)			5.4.654
C. Tom Cotton for Congress			Date of Disbursement
Mailing Address PO Box 379			05 09 2012
Mailing Address FO Box 379			00 00 2012
City	State Zip Code		Transaction ID - D129124
Dardanelle	AR 72834		Transaction ID : D128124
Purpose of Disbursement Contributions for Federal Candidates			
Candidate Name		011	Amount of Each Disbursement this Period
Tom Cotton		Category/ Type	2500.00
	ment For: 2012	Туре	
Senate Stag	Primary General		
President	Other (specify) ▼		
State: AR District: 04			
SUBTOTAL of Disbursements This Page (optional).		·····	4500.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 221 OF 227
ITEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 X 23	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
National Emergency Medicine Pol	itical Action Committ	ee		
Full Name (Last, First, Middle Initial)			Date of Disburseme	
A. Tony Cardenas for Congress	Tony Cardenas for Congress			/ Y Y Y Y
Mailing Address 3700 Wilshire Boulevard, Suite 10			06 21	2012
City Los Angeles	State Zip Code CA 90010		Transaction ID : [0134229
Purpose of Disbursement	00010			
Contributions for Federal Candidates		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type		5000.00
Office Sought: House Disburse Senate President	ment For: 2012 Primary			
State: CA District: 29				
Full Name (Last, First, Middle Initial)			D (D) .	
B. Udall For Colorado			Date of Disburseme	
Mailing Address PO Box 40158			04 25	2012
City Denver	State Zip Code CO 80204		Transaction ID : [0127770
Purpose of Disbursement Contributions for Federal Candidates		011	Amount of Each Dis	sbursement this Period
Candidate Name Rep. Mark Udall		Category/ Type		2500.00
•	ment For: 2014	туре		
	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Udall For Colorado			Date of Disburseme	
Mailing Address PO Box 40158			06 21	2012
City Denver	State Zip Code CO 80204		Transaction ID : [D134205
Purpose of Disbursement				
Contributions for Federal Candidates Ontributions for Federal Candidates Ontributions for Federal Candidates			Amount of Each Dis	sbursement this Period
Rep. Mark Udall		Category/ Type		2000.00
Office Sought: House Senate President Disburse	ment For: 2014 Primary General Other (specify) ▼	71.		
State: CO District:				
SUBTOTAL of Disbursements This Page (optional).		······		9500.00
TOTAL This Period (last page this line number only	·)	·····•		

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER:	PAGE 222 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	nents may not be sold or use			
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
National Emergency Medicine Poli	tical Action Committe	ee		
Full Name (Last, First, Middle Initial)				
A. VIEW PAC			Date of Disbursemen	nt
Mailing Address 3106 Russell Rd			05 09	2012
			00 00	2012
•	State Zip Code		Transaction ID : D	128134
Alexandria Purpose of Disbursement	VA 22305-1720			
Contributions for Federal PACs/Committees		011	Amount of Each Dis	oursement this Period
Candidate Name		Category/		1000.00
Office Sought: House Disburse	ment For: 2012	Туре		1000.00
Senate Dispurse	Primary General			
President	Other (specify) ▼			
State: District:	annual contribution	n		
Full Name (Last, First, Middle Initial)			Data of Dishurasman	- 1
B. VOICE FOR FREEDOM			Date of Disbursemen	/ Y Y Y Y Y
Mailing Address 3502 Halcyon Drive			06 21	2012
City	State Zip Code		Transaction ID : D	134227
Alexandria Purpose of Disbursement	VA 22305		Transaction 12 12	.0.121
Contributions for Federal PACs/Committees		011	Amount of Each Dis	oursement this Period
Candidate Name		Category/		5000.00
		Type	7	5000.00
Office Sought: House Disburse Senate	ment For: 2012 Primary General			
	Other (specify)			
State: District:	Annual contribution	on		
Full Name (Last, First, Middle Initial)				
C. VOICE FOR FREEDOM			Date of Disbursemen	
Mailing Address 3502 Halcyon Drive	Mailing Address 3502 Halcyon Drive			2012
City Alexandria	State Zip Code VA 22305		Transaction ID : D	134474
Purpose of Disbursement	Purpose of Disbursement			
VOID CK 7610 6/27/12			Amount of Each Dis	oursement this Period
Candidate Name		Category/		-2500.00
Office Sought: House Disburse	ment For: 2010	Туре	7	7
Senate	Primary General		VOID CK 7610 6/27/1	2
President	Other (specify) ▼			
State: District:	VOID CK 7610 6/27	7/12		
SUBTOTAL of Disbursements This Page (optional)				3500.00
OODIGIAL OF DISDUISEMENTS THIS Page (Optional)		·····		7
TOTAL This Period (last page this line number only)		7	7

SCHEDULE B (FEC Form 3X)	Hee consents as built ()	FOR LINE I		PAGE 223 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)	ne and address of any poiling	ai committee to	SORGE CONTINUEDRIS II	om such committee.
National Emergency Medicine Poli	tical Action Committ	ee		
Full Name (Last, First, Middle Initial)			5	
A. Volunteers For Shimkus			Date of Disbursem	ent
Mailing Address PO Box 5458			06 13 2012	
•	State Zip Code		Transaction ID :	D133879
Springfield Purpose of Disbursement	IL 62705		Transaction is .	D 100013
Contributions for Federal Candidates		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		2500.00
Rep. John M. Shimkus Office Sought: House Disburse	mont For: 0040	Type		2300.00
Office Sought: House Disburse Senate President	ment For: 2012 Primary			
State: IL District: 19				
Full Name (Last, First, Middle Initial)			Data of Diahuraam	ont
Wyoming Values PAC			Date of Disbursem	ent
Mailing Address PO Box 1665			04 25	2012
Alexandria	State Zip Code VA 22313		Transaction ID :	D127764
Purpose of Disbursement Contributions for Federal PACs/Committees		011	Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		5000.00
	ment For: 2012			
Senate President	Primary General			
State: District:	Other (specify) ▼ Annual contribut	ion		
Full Name (Last, First, Middle Initial)				
>.			Date of Disbursem	
Mailing Address			M M / D D	/ Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each D	isbursement this Period
Office Sought: House Disburse	ment For:	71 -		7
Senate	Primary General			
President Pictriot:	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				7500.00
TOTAL This Period (last page this line number only)	·····•		328500.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 224 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information assisted from such Departs and Chat-	monte may not be cold or		
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Pol	itical Action Committ	ee	
Full Name (Last, First, Middle Initial)			
A. Leigh Barrow			Date of Disbursement
Mailing Address 2824 E 25th Street			06 29 2012
City	State Zip Code		Transaction ID - D424522
Tulsa	OK 74114		Transaction ID : D134532
Purpose of Disbursement Refunds of Contributions from Individual			Amount of Each Disbursement this Period
Candidate Name		Category/	250.00
Office Sought: House Disburse	ement For:	Туре	
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)B. Dr. Angela D Cheers			Date of Disbursement
Dr. Angela D Cheers			M = M / D = D / Y = Y = Y
Mailing Address 2292 Allen Rd			05 15 2012
City Ortonville	State Zip Code MI 48462-9300		Transaction ID : D129193
Purpose of Disbursement REFUND		· · ·	Amount of Each Disbursement this Period
Candidate Name		Category/	100.00
Office Sought: House Dishure	mont For	Туре	100.00
Office Sought: House Disburse Senate	ement For: Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			Date of Diaburcament
C. ihoih ihoih			Date of Disbursement
Mailing Address 122 ihoihi	Mailing Address 122 ihoihi		
City	State Zip Code		Transaction ID : D128960
ihoih	IA 10001		Halisaction ID . D120300
Purpose of Disbursement RFND UNKNOWN CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	5.00
Office Sought: House Disburse	ement For: 2012	717-	
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		······	355.00
TOTAL This Period (last page this line number only	/)		

SCHEDULE B (FEC Form 3X)		T FOR LINE	NUMBER: PAGE 225 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	NOMBELL.
I I LIVIIZED DISBURSEIVIEN IS	for each category of the	21b	22 23 24 25 26
	Detailed Summary Page	27	X 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	nents may not be sold or use	ed by any nerso	
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Polit	ical Action Committ	ee	
Full Name (Last, First, Middle Initial)			
A. Dr. Mark Livingston			Date of Disbursement
Moiling Address 212 F : D :			M M / D D / Y Y Y Y
Mailing Address 610 Estes Rd			06 28 2012
City	state Zip Code		
·	WA 98908-8750		Transaction ID: D134855
Purpose of Disbursement			
RFND CK TO REPLACE CK#6495			Amount of Each Disbursement this Period
Candidate Name		Category/	100.00
Office County		Type	100.00
Office Sought: House Disbursen			
	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. Dr. Mark Livingston			Date of Disbursement
Dr. Mark Livingston			M M / D D / Y Y Y Y
Mailing Address 610 Estes Rd			06 27 2012
	tate Zip Code		Transaction ID : D134470
	WA 98908-8750		
Purpose of Disbursement VOID CK 6495 6/27/12			Amount of Each Disbursement this Period
Candidate Name			, and an each Dispulsement this Period
		Category/ Type	-100.00
Office Sought: House Disbursen	nent For:	1,700	
	Primary General		VOID CK 6495 6/27/12
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
C. Dr. Derek Wierzbicki			Date of Disbursement
Matter Address is the			M M / D D / Y Y Y Y
Mailing Address 19 Pinehurst Dr			05 09 2012
City	state Zip Code		
New Orleans	LA 70131-3354		Transaction ID: D129192
Purpose of Disbursement			
REFUND			Amount of Each Disbursement this Period
Candidate Name		Category/	100.00
Office County		Туре	100.00
Office Sought: House Disbursen Senate			
	Primary General Other (specify) ▼		
State: District:	Culoi (Specify)		
2.5			
SUBTOTAL of Disbursements This Page (optional)			100.00
CODITION OF DISSURGEMENTS THIS T age (optional)			7 7
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)	Hee concrete extradists (FOR LINE		PAGE 226 OF 227
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orling		
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c 29 30k
Any information copied from such Reports and Statem			on for the purpose of	
or for commercial purposes, other than using the name	e and address of any politic	cai committee to	solicit contributions	rrom such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicine Politi	ical Action Committ	·ee		
	——————			
Full Name (Last, First, Middle Initial)			Date of Dishara	ment
A. Dr. Alexander Yeats			Date of Disburse	
Mailing Address 270 6th St			05 23	
•	State Zip Code		Transaction ID	: D128972
Atlantic Bch Purpose of Disbursement	FL 32233-5318		mansacuon ID	. = .=3012
Purpose of Disbursement RFND NON MBR SINCE 2011			Amount of Each	Disbursement this Period
Candidate Name		Category/		
Office Sought	uont For	Type		100.00
Office Sought: House Disbursem	nent For: Primary General			
	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)			5	
В.			Date of Disburse	
Mailing Address			M M / D	D / Y Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
·			Amount of Each	Disbursement this Period
Candidate Name		Category/		
Office Sought	lent For-	Type		7
Office Sought: House Disbursem	nent For: Primary General			
	Other (specify) General			
State: District:	··· · · · · · · · · · · · · · · · · ·			
Full Name (Last, First, Middle Initial)				
C.			Date of Disburse	
Mailing Address			M M / D	D / Y Y Y Y
	+o+o = -			
City S	State Zip Code			
Purpose of Disbursement				
Condidate		Amount of Each	Disbursement this Period	
Candidate Name		Category/		
Office Sought: House Disbursem	nent For:	Туре		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
CURTOTAL of Disharmon . To T				100.00
SUBTOTAL of Disbursements This Page (optional)		······		100.00
TOTAL This Period (last page this line number only).				555.00
(page mie namber omy).				The state of the s

Use separate schedule(b) for each category of the Detailed Summary Page	SC	HEDULE B (FEC Form 3X)		, FOR LINE	NUMBER: PAGE 227 OF 22
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit confributions from such committee. NAME OF COMMITTEE (in Full) NATIONAL FIRST, Middle Initial) A. CHASE BANK Mailing Address 546 E John Carpenter Fwy City State: District: Full Name (Last, First, Middle Initial) Office Sought: Full Name (Last, First, Middle Initial) CHASE BANK Mailing Address 545 E John Carpenter Fwy City State: District: Full Name (Last, First, Middle Initial) CHASE BANK Mailing Address 545 E John Carpenter Fwy City State: District: Full Name (Last, First, Middle Initial) CHASE BANK Mailing Address 545 E John Carpenter Fwy City State: District: Full Name (Last, First, Middle Initial) CHASE BANK Mailing Address 545 E John Carpenter Fwy City Sanate Disbursement For: District: Full Name (Last, First, Middle Initial) Chase Sanate Disbursement For: Sanate Disburs	ITE	MIZED DISBURSEMENTS		(check only	one)
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Pall) National Emergency Medicine Political Action Committee Full Name (Last, First, Middel initial) A. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Invited Primary General Primary General Primary General Other (specify) ▼ State Zip Code TX 73082-8114 Full Name (Last, First, Middel initial) B. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 73082-8114 Full Name (Last, First, Middel initial) CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 73082-8114 Full Name (Last, First, Middel initial) Chase Bank Bank Bank Bank Bank Bank Bank Bank					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME of EAST, Middle Initial) National Emergency Medicine Political Action Committee	Δ	information period from such Deposits and Chaten			
National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees May 2012 Candidate Name Office Sought: House Persident John Carpenter Fwy City State: Disbursement For: Senate President John Carpenter Fwy City State: Transaction ID : D133857 Amount of Each Disbursement this Period TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Office Sought: House Disbursement For: State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Office Sought: House Disbursement For: Senate President John (Specify) ▼ Office Sought: House Disbursement For: Senate President John (Specify) ▼ State: District: Transaction ID : D133734 Amount of Each Disbursement this Period Category' Jype Office Sought: House Disbursement For: Senate President John (Specify) ▼ State: District: Transaction ID : D134647 Amount of Each Disbursement This Period Category' Jype Office Sought: House Disbursement For: Senate President John (Specify) ▼ State: District: Transaction ID : D134647 Amount of Each Disbursement This Period Category' Jype Office Sought: House Disbursement For: Senate Primary General President John (Specify) ▼ State: District: Transaction ID : D134647 Amount of Each Disbursement This Period Category' Jype Office Sought: House Disbursement For: Senate Primary General President John (Specify) ▼ Substotal of Disbursement This Period Category' Jype Office Sought: House Disbursement For: Senate Primary General President John (Specify) ▼ Substotal of Disbursements This Page (optional)					
Full Name (Last, First, Middle Initial) A. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code 1X 75062-8114 Purpose of Disbursement Bank Fees May 2012 Candidate Name Office Sought: House Disbursement For: Senate President 1X 75062-8114 Full Name (Last, First, Middle Initial) B. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code 1X 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Office Sought: House Disbursement For: Senate President 1X 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy Category: Tansaction ID: D133734 Amount of Each Disbursement this Period Category: Tansaction ID: D134647 Furpose of Disbursement Bank Fees June 2012 Candidate Name Category: Tansaction ID: D134647 Transaction ID: D134647 Amount of Each Disbursement It Senate 2D Code 1X 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category: Tansaction ID: D134647 Transaction ID: D134647 Amount of Each Disbursement It Senate 2D Category: Senate President Disbursement For: Senate President D	1	NAME OF COMMITTEE (In Full)			
A. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees May 2012 Candidate Name Office Sought: President Disbursement For: Senate Primary General Propose of Disbursement State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City Tx 75062-8114 Purpose of Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City Tx 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Category/ City State Zip Code Tx 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Category/ City State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State: District: City State: District:		National Emergency Medicine Polit	tical Action Commi	ttee	
Mailing Address 545 E John Carpenter Fwy City State Zip Code Irving TX 75062-8114 Purpose of Disbursement Bank Fees May 2012 Candidate Name Office Sought: House Disbursement For: Senate President State: Dishote: President Disbursement For: Senate President Dishotesement Dishotesement For: Senate President Dishotesement Dish	_				5 . (5:1
Mailing Address 545 E John Carpenter Fwy City City State Zip Code TX 75662-8114 Purpose of Disbursement Bank Fees May 2012 Candidate Name Citagory/ City State Disbursement For: Senate Primary General Primary General Purpose of Disbursement this Period Category/ City State Zip Code TX 75662-8114 Date of Disbursement this Period Category/ City State Zip Code TX 75662-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Colfice Sought: House Disbursement For: Senate Primary General Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Colfice Sought: President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Condidate Name Category/ City State: District: Full Name (Last, First, Middle Initial) Condidate Name Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Transaction ID: D133734 Amount of Each Disbursement this Period Category/ Type Transaction ID: D134647 Amount of Each Disbursement Category/ Type Category/ T	Α. (CHASE BANK			
Irving Tx 75062-8114 Purpose of Disbursement Bank Fees May 2012 Candidate Name Category/ Type Office Sought: House President Other (specify) ▼ State: Disbursement For: Senate President Other (specify) ▼ Category/ Type Disbursement For: Senate President Other (specify) ▼ Date of Disbursement Inis Period Amount of Each Disbursement Inis Period Date of Disbursement Date of Disbursement Transaction ID: D133857 Amount of Each Disbursement Inis Period Date of Disbursement Transaction ID: D133734 Date of Disbursement Date of Disbursement Transaction ID: D133734 Transaction ID: D133734 Transaction ID: D133734 Amount of Each Disbursement Inis Period Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) ▼ Category/ Type Date of Disbursement Date of Disbursement Transaction ID: D134647 Amount of Each Disbursement Category/ Type Transaction ID: D134647 Amount of Each Disbursement Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate President Disbursement This Period Category/ Type Office Sought: House Disbursement For: Senate President D	N	Mailing Address 545 E John Carpenter Fwy			
Transaction ID : D133734 Purpose of Disbursement Bank Fees May 2012 Candidate Name City Inving TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name City Inving TX Cotegory/ Type Disbursement Category/ Type Transaction ID : D133734 Amount of Each Disbursement this Period Category/ Type Transaction ID : D133734 Amount of Each Disbursement Date of Disbursement this Period Category/ Type City Inving TX 75062-8114 Purpose of Disbursement this Period Category/ Type City Inving TX 75062-8114 Purpose of Disbursement this Period Category/ Type City Inving TX Type Category/ Type Type Cat	Ċ	City			Transaction ID : D133857
Bank Fees May 2012 Candidate Name Category/ Office Sought: House Disbursement For: Senate President District: Primary General President District: Distric		•	TX 75062-8114		Transaction is : 5100007
Office Sought: House Senate President State: District: Senate President State: District: State: District: State: District: Senate President State: District: State: District: State: District: State: District: State: District: State: District: District: Senate President Disbursement For: Senate President Disbursement For: Disbursement Disbursement For: District: District: State: District: District: Senate President Disbursement For: Disbursement Disbur					Amount of Each Disbursement this Period
Office Sought:	7	Candidate Name			893.74
Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Clast, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy Disbursement For: Senate Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement For: Senate Primary General Primary Gener	7	Office Cought: House Dishurgen	nont For:	Туре	
State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) B. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Inving TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Category/ Type Office Sought: House President President State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Type Category/ Type Other (specify) ▼ Date of Disbursement this Period Category/ Type Date of Disbursement this Period Condidate Name Category/ Type City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary General President State: District: Substortal of Disbursements This Page (optional)					
B. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Irving TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Disbursement For: Senate Primary General Primary State: Disbursement Bank Fees June 2012 City Inving TX 75062-8114 Date of Disbursement Transaction ID : D133734 Amount of Each Disbursement this Period Date of Disbursement Transaction ID : D133734 Amount of Each Disbursement this Period Date of Disbursement this Period Transaction ID : D134647 Amount of Each Disbursement Transaction ID : D134647 Date of Disbursement Transaction ID : D134647 Amount of Each Disbursement Category/ Type Transaction ID : D134647 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General Primary General Primary General Primary General Primary General Disbursement This Page (optional)			,		
B. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Irving TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Disbursement For: Senate President Other (specify) ▼ State: District: City State Zip Code Transaction ID: D133734 Amount of Each Disbursement this Period Category/ Type Date of Disbursement To Disbursement To District: Date of Disbursement To Date of Date		State: District:			
Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy Date of Disbursement this Period Category/ Type Date of Disbursement Transaction ID: D133734 Amount of Each Disbursement this Period Date of Disbursement Transaction ID: D133734 Amount of Each Disbursement this Period Date of Disbursement Transaction ID: D134647 Transaction ID: D134647 Transaction ID: D134647 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Subtrotal of Disbursement this Period State: District: Subtrotal of Disbursement This Page (optional)		Full Name (Last, First, Middle Initial)			
Mailing Address 545 E John Carpenter Fwy City	B.	CHASE BANK			Date of Disbursement
City	_	Apiling Addross 545 5 Jahr Company 500			
Irving TX 75062-8114 Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Category/ Type Office Sought: House Primary General Primary General Other (specify) ▼ City State Zip Code Irving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name City State Zip Code Irving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Office Sought: House Disbursement For: General Disbursement this Period Office Sought: House Disbursement For: General Disbursement For: General Disbursement This Page (optional). Substortion ID: D133734 Amount of Each Disbursement this Period Transaction ID: D134647	_	Mailing Address 545 E John Carpenter Fwy			04 30 2012
Purpose of Disbursement Bank Fees Apr 2012 Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Category/ Type Office Sought: House Office Sought: House Senate Primary General Other (specify) ▼ State: District: Subtotal of Disbursement this Period State: District: Subtotal of Disbursement This Page (optional)			•		Transaction ID : D133734
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Inving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)		•	73002-0114		
Office Sought: House Disbursement For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Irving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)		Bank Fees Apr 2012			Amount of Each Disbursement this Period
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Disbursement For: General Other (specify) ▼ State: District: Senate Primary General Other (specify) ▼ Substortal of Disbursements This Page (optional)	7	Candidate Name			392 25
Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code Inving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substotia Disbursement For: Senate Primary General Other (specify) State: District: Substotia Disbursement For: Senate Primary General Other (specify) State: District:	7	Office Cought		Туре	002.20
State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City Irving TX T5062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Primary General Office Sought: District: Substortal of Disbursements This Page (optional)	(
State: District: Full Name (Last, First, Middle Initial) C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City Irving Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House President State: District: Substock And Disbursement For: Senate Primary Other (specify) State: District: Substock And Date of Disbursement Date of Disbursement Transaction ID: D134647 Amount of Each Disbursement this Period Category/ Type Other (specify) State: District: Substock And Disbursements This Page (optional)					
C. CHASE BANK Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: Subtrotal of Disbursement Date of Disbursement M	S		(- /)		
Mailing Address 545 E John Carpenter Fwy City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	F	Full Name (Last, First, Middle Initial)			
Mailing Address 545 E John Carpenter Fwy City	C. (CHASE BANK			Date of Disbursement
City State Zip Code TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Subtotal of Disbursements This Page (optional)	-				
Irving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Primary General Other (specify) ▼ Substrict: Primary General Other (specify) ▼ Substrict: Primary General Other (specify) ▼	IN	Mailing Address 545 E John Carpenter Fwy			06 30 2012
Irving TX 75062-8114 Purpose of Disbursement Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Substrict: Substrict: Substrict: 2253.85	Ċ	Dity	State Zip Code		Transaction ID : D124647
Bank Fees June 2012 Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	_	9	TX 75062-8114		Transaction ID: D134647
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)					
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	7	Candidate Name			Amount of Each Disbursement this Period
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)					967.86
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)	7	Office Sought: House Disbursen	nent For:	71	
State: District: SUBTOTAL of Disbursements This Page (optional)		Senate	Primary General		
SUBTOTAL of Disbursements This Page (optional)			Other (specify) ▼		
2352 95	_	State: District:			
2352 95	 	IDTOTAL of Dishara annual Till D. ()			2253.85
TOTAL This Period (last page this line number only)	SU	BIUIAL OF Dispursements This Page (optional)		·····	2200.00
	То	TAL This Period (last page this line number only)			2253.85